



Fabric Order Form

BILL TO:

School/Organization		
Contact Person		
Address		
City	State	Zip
daytime phone		
email:		

SHIP TO:

School/Organization		
Contact Person		
Address		
City	State	Zip
evening phone		

Shipping

residence:___ non-residence:___

UPS Ground (5% of order)	
UPS 3 day (6% of order)	
UPS 2 day (8% of order)	
Next day (12% of order)	

prepayment in full, we accept checks and all major CCs

Payment

credit card number		
expiration date	security code	
name (as it appears on card)		
card holders billing address		
city	state	zip

ORDER

fabric name	description	color	qty	price	total

signature: _____

subtotal	
shipping	
total	
deposit	
balance	

By signing this form I verify that the order is complete and accurate and that I agree to Dornink policies.

All orders must be paid in full prior to shipping. All sales are final on fabric and trim.