

# MAIL ORDER FORM

**CUSTOMER INFORMATION**

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City                      State                      ZIP

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Email

**SPECIAL INSTRUCTIONS**

Athlete	Item Description	Autograph Fee	Inscription Fee	Inscription	Total
Subtotal					
Shipping					
Authentication					
Grand Total					

**Payment Information**

PayPal Receipt Enclosed                     
  MC     Visa     AmEx     Disc

Check or Money Order Enclosed    Name on Card: \_\_\_\_\_

Please Charge Following Card                      Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_/\_\_\_\_ Security Code: \_\_\_\_\_