

Cascade Bicycle Club Tyvek Jacket Order Form

SHIPPING INFORMATION (PLEASE PRINT)

Name:		
Address:		
City:	State:	Zip:
Email:		
Daytime Phone (required):		

<p>MAIL ORDER TO: Cascade Bicycle Club P.O. Box 15165 Seattle, WA 98115</p> <p>FAX ORDER TO: (206) 522-2407</p>

ITEM	XS	S	M	L	XL	2XL	3XL	QTY	Price (includes tax)	Total
2011 STP TVVEK JACKET	out	out				out			\$12	
2010 STP TYVEK JACKET	out	out				out			\$7	
2009 STP TYVEK JACKET	out	out			out	out			\$7	
2007 STP TYVEK JACKET	out	out	out	out					\$5	
2006 STP TYVEK JACKET	out	out	out						\$5	

<input type="checkbox"/> I'd like to pick up my order at Cascade Bicycle Club. Please email me a notice with directions and office hours when my order is ready. (There will be \$0 shipping charge because I am picking up my order) <input type="checkbox"/> Please ship my order to me. (I have included shipping charges in the TOTAL)

Subtotal:	
Shipping:	
TOTAL:	

Credit card **billing** info if different than shipping:

Address:		
City:	State/Prov:	Zip:

Shipping and Handling Charges:	
1 item :	\$6.00
Add \$1 for each additional item.	

Payment Method: <input type="checkbox"/> VISA <input type="checkbox"/> MasterCard <input type="checkbox"/> Check <input type="checkbox"/> Cash <div style="display: flex; justify-content: space-around; margin-top: 5px;"> [][][][][] - [][][][][] - [][][][][] - [][][][][] </div> Exp. date: _____ Name on card: _____ <p style="text-align: center;">Please make checks payable to CASCADE BICYCLE CLUB</p>

Please allow 5-7 days from receipt of order for delivery
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Office use: Rec'd _____ fax / mail / CBC / phone CC Auth. # _____ Check # _____

Date Picked Up: _____ Date Shipped: _____

Order # _____