

# Barcode Order Form



Please complete this 2-page form in its entirety. Please include business and alternate telephone numbers in case we have questions about your order. Be advised that delays in your order may occur if we cannot contact you. Actual shipping charges will be added to your invoice. Please add \$5.00 or 10.0% (whichever is greater) for shipping and handling for continental USA locations only (excludes Alaska/Hawaii). Please allow 2-3 weeks for delivery from **receipt** of your order.

Your PO # \_\_\_\_\_ Customer # \_\_\_\_\_

I'm paying by Credit Card. Please contact me at (Phone or Email) \_\_\_\_\_

**BILL TO:**

School / District Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_

Contact Name \_\_\_\_\_ Alternate Contact \_\_\_\_\_

Business Phone \_\_\_\_\_ Alternate Phone \_\_\_\_\_

Fax \_\_\_\_\_ E-mail Address \_\_\_\_\_

**SHIP TO:** [ ] Same as billing (will not autofill fields below)

School / District Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_

Attention To \_\_\_\_\_ Phone \_\_\_\_\_

***Please re-check the information you have provided on this form to verify accuracy. Fill out this form completely.***

By signing this, I understand that my order will be processed based on the information provided on this form. If I request changes after this form has been submitted, or after my order has been processed, I understand that these changes may incur additional charges.

\_\_\_\_\_ Signature (required)

***Follow this link for more information on how to fill out the barcode order form:***

[BARCODE ORDER FORM INSTRUCTIONS](#)

