BIG HIT ORDER FORM

Your Company Name _____

Contact Person _____

Phone Number _____

Fax Number _____

Big Hit Staff Member _____

Date _____

Delivery date ____/____/____

DELIVERY ADDRESS

_____

_____

_____

_____

_____

_____

Garment details below

DETAILS

Mens	Style	Colour		Sml	Med	Lge	XL	2XL	3XL	4XL	5XL

Ladies	Style	Colour		8	10	12	14	16	18	20	22	24

Kids	Style	Colour		4	6	8	10	12	14	16

Kids	Style	Colour		4	6	8	10	12	14	16

Caps	Style	Colour	Quantity	Size

Signature

_____

DISCLAIMER PLEASE NOTE DECORATION OF GARMENTS WILL PROCEED UPON SIGNATURE OF FORM. This form acts as a formal approval to proceed with your order. Changes to logo after form has been signed may incur additional set up charges. Please feel free to contact your apparel manager to discuss any questions you may have. All goods remain the property of Big Hit Teamwear until paid in full. 50% deposit required on all orders to proceed.

OFFICE USE ONLY

◯ Fabric Ordered (date) ____/____/____ ◯ Quantity Checked ◯ Cut ◯ Collar

◯ Customer Phoned