



MASK ORDER FORM

NAME :

SURNAME :

DELIVERY ADDRESS :

(nearest Postnet)

CONTACT NUMBER :

EMAIL :

Minimum of ten (10) T-Shirts per order.

Please return completed request form, together with image(s), to info@purchasemyproduct.co.za

MASK DETAILS

Please indicate:

SIZE

ADULT

CHILD

MASK COLOUR (only 1 colour per order)	QUANTITY	FRONT MESSAGE/ IMAGE (please send images as attachments)	FONT		BACK MESSAGE/ IMAGE (please send images as attachments)		FONT		TOTAL NUMBER OF COLOURS IN DESIGN (excl. mask colour)
Black			Arial			Arial			
White									
Grey			STENCIL			STENCIL			
Red									
Orange			Comic Sans			Comic Sans			
Yellow									
Green			Baskerville			Baskerville			
Blue									
Pink			<i>Brush Script</i>			<i>Brush Script</i>			
Purple									

A quote will be sent via email 48 hours after receipt of the completed form, including all images.