



T-SHIRT 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

T-SHIRT DETAILS

Please indicate number per size, as well as total.:

SIZE							
SMALL	<input type="text"/>	MEDIUM	<input type="text"/>	LARGE	<input type="text"/>	X. LARGE	<input type="text"/>
XX. LARGE	<input type="text"/>	XXX. LARGE	<input type="text"/>				
TOTAL	<input type="text"/>						

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

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