Order Form

41 Perry Hill Road
Westhampton, MA 01027
413-529-2868 Fax: 413-529-2811

Bill To *(Credit Card Billing Address)*

School: _____

Name: _____

Street: _____

City/State/Zip: _____

Phone: _____ Tax Exempt #: _____

E-mail: _____

Payment: ❑ Check ❑ Invoice-PO#_____ ❑ MC/Visa/Dscvr/AmEx

Card #: _____

Exp. date: _____ CVV#: _____

Ship To

School: _____

Name: _____

Street: _____

City/State/Zip: _____

Shipping & Handling

Order Amount	US	Canada	Other Locals
up to $50	$6.50	$12	*contact us*
$50 to $100	$8.00	$16	
$100 to $200	$9.50	$18	
$200 to $300	$11.00	$25	
over $300	$12.50	add 15%	

Item Description	Item #	Qty	Price Each	Total
			Subtotal	
			Tax (MA shipping address-add 5%; TX shipping address-add 6.25%)	
			Shipping & Handling (see chart above)	
			TOTAL	