19 Walden Drive Arden, NC 28704 828.684.4512 fax 828.681.8921



Christ School Personalized Announcement Order Form

Please complete the following form and s	scan/emai	l to <u>pmt@</u>	imagesmith.	com or fax to 828-68	31-8921
Quantity of Cards to order: 25 (\$80.00)) 🗆 50	(\$90.00)	□ 100 (\$£	100.00)	
(Includes one-sided 5x7 cards on heavy N	atural cov	er stock ar	nd matching	blank envelopes)	
Name to be printed on cards: (be sure to write exactly as you'd like it processes)	rinted)				
Email address for sending proof: (proof approval required before printing)					
Shipping Address (no PO Box, please):					
☐ Ship my order(please provide address	s)				
☐ Pickup at ImageSmith in Arden, NC					
Pay	yment I	nforma	tion		
Cardholder's Name (please print)		Billing Street Address			
E-mail address (we will e-mail a receipt)	_		Phone Number		-
Credit Card Type: ☐ Visa	□ Maste	rCard	□ AmEx	□ Discover	
Credit Card Number		Expiration Date		Security Code	
Cardholder Signature			Date		

^{*}Shipping will be added to the order (\$15 for Ground Rates, USA shipments)

^{**}Orders shipped within North Carolina will incur 7% sales tax