

THE TROPHY SHOP

TROPHY ORDER FORM

Phone: 740-962-4888 | Fax: 740-962-3852 | Email: info@4uimprints.com
www.4uimprints.com

NAME: _____ | COACH: _____

ADDRESS: _____

PHONE: _____ | CELL: _____ | EMAIL: _____

1. CHOOSE TROPHY SPORTS THEME:

- | | | |
|--|--|---|
| <input type="checkbox"/> SOCCER | <input type="checkbox"/> SOFT BALL | <input type="checkbox"/> DANCE / BALLET |
| <input type="checkbox"/> FOOTBALL | <input type="checkbox"/> GIRLS VOLLEY BALL | <input type="checkbox"/> GYNASTICS |
| <input type="checkbox"/> BASEBALL | <input type="checkbox"/> VOLLEY BALL | <input type="checkbox"/> WRESTLING |
| <input type="checkbox"/> CHEERLEADING | <input type="checkbox"/> TRACK | <input type="checkbox"/> _____ |
| <input type="checkbox"/> GIRLS SOFT BALL | <input type="checkbox"/> DANCE / JAZZ | _____ |
| <input type="checkbox"/> BASET BALL | <input type="checkbox"/> DANCE / TAP | |

2. **TEAM \ ORGANIZATION NAME:** _____

3. **PLAYERS \ RECIPIENT NAME:**

FIRST NAME: _____ LAST NAME: _____

4. **YEAR:** _____

5. TROPHY PRICE: \$ _____ | 7% TAX: \$ _____ | **BALANCE DUE: \$ _____**

6. **PAYMENT OPTIONS:** (IF USING A CREDIT CARD YOU MAY FAX FORM TO 962-3852)

CHECK #: _____ | VISA | AM. EXPRESS | M.C. | CASH

Mail or Drop off Checks or Cash (don't mail): 45 West Main Street, McConnelsville Ohio 43756

I am qualified to order the above products, as well as to use the below credit card.

My credit card will be billed for the above items as well as tax, and a 4% credit card processing fee for each order.

I have read and understand the terms and agreement states on the website, 4uimprints.com. Free shipping on orders \$250.00 or more.

Card Type	Card Numbers	Expiration	Security Code
MC/VISA/A.Ex	_____ _____ _____ _____	____/____	_____

SIGNATURE: _____ DATE: _____