

CapSure Canada

34 Harriet Street Penetanguishene, Ontario L9M 1L1
Canada-Tel: 1-705-549-8091 Fax- (603) - 669-2529
E-mail-syndi@capsurecanada.com

Retail & First Time Order Form

Please Fill out the Following Form and submit to our Office

Item Number# _____ Quantity _____ Color _____

Billing information

Full name _____ -

FullAddress _____

Home Phone: _____ Cellular #: _____

Shipping Address if different from
above _____

Method of payment: () Credit card () Certified Cheque () Money Order () Cash

For Credit Card Use Only:

Credit Card #: _____ Expiry Date: _____

Name of Card Issuing Bank: _____

Card Holder's Name: _____

Card Holder's Address: _____

Card Holder's Telephone #: _____

*This is to authorizes CapSure to charge my credit card account for purchases for the above
company./Person*

Card Holder's Signature: _____ Date: _____

Please initial the following line if this is a standing authorization for future orders:

Date Received _____ -