BADGE ORDER FORM: FAX 1-800-467-1636

PLEASE COMPLETE THE FOLLOWING AND FAX OR MAIL AT YOUR CONVENIENCE.

BILL TO:		SHIP TO: Check here if same as bill to																										
Contact Name:																												
School Name:Address:							School Name:																					
																	Contact's Email:											
																											ATE SHEE	
															Your Logo Here						OPTIONAL: Check if you want the same mascot and school name on the customized							
															Logo Here (Print name of school) VISITOR						"Visitor Pass" label that was sent. ATTACHMENT: Lanyards* Magnetic Fasteners Clip-on Fasteners							
*LANYARD C	Plastic Bade							e, Red		•	n label typ	e, sketch a la	QUANTITY															
LABEL TYPE	BAD					OGE CO	SE COLORS																					
Visitor	White	Yellow	Red	Orange	Flourescent Orange		Light Blue	Gold	Beige	Green	Silver	Teal																
Substitute	White	White Yellow Red Orange		Flourescent Orange		Light Blue	Gold	Beige	Green	Silver	Teal																	
Volunteer	White	White Yellow Red Orange		Orange	Flourescent Orange		Light Blue	Gold	Beige	Green	Silver	Teal																
Temporary ID	White	Yellow	Red	Orange	Floures	Flourescent Orange		Gold	Beige	Green	Silver	Teal																
Other:	White	Yellow	Red	Orange	Floures	cent Orange	Light Blue	Gold	Beige	Green	Silver	Teal																
TEXT COLOR	Black	Royal Blue	Navy Blue	Red	Hunter Green	Kelly Green	Maroon	Oran	ge	Purple	Gold	Silver																
BADGE PRICING TOTAL QUANTITY																												
10 - 24	\$4 50	per Badg	Ie.						PF	RICE (SEE	PRICING	MATRIX)																
25 - 49			ORDER SUBTOTAL																									
25 - 49 \$4.00 per Badge 50 or More \$3.50 per Badge							ONE-TIME \$35 SETUP FEE WAIVED																					
30 OF WOLE	#3.30 per bauge										ADD	SHIPPING	\$9.95															
\A/E \A/III \ \A/A			OPTIONAL: ADD LOG BOOK (\$10)																									
WE WILL MATCH ANY COMPETITOR 5 PRICE!												ER TOTAL																
PAYMENT OPTIC	ONS											'																
☐ VISA ☐ MasterCard ☐ AMEX Card Number:								Exp. Date:																				
☐ Bill Me Print N																												
☐ P.O. #			. ^	ccurat	e I ah	el Desir	nns In	c																				

P.O. Box 895, Cumming GA 30028-0895
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