



Order Form

Please Print

Name: _____ Date: _____

Billing Address

Street: _____

City: _____ State: _____ Zip: _____

Daytime Phone:(_____) _____ E-mail: _____

Shipping Address (if different from billing address)

Street: _____

City: _____ State: _____ Zip: _____

Daytime Phone:(_____) _____ E-mail: _____

Method of Payment

Check Money Order Credit Card Cash (do not send cash by mail)

Card Number: _____ Exp Date: _____

Cardholder Signature: _____

Cardholder Contact Phone: (_____) _____

Items

item #	description	qty	qty total

Make Checks Payable to:

Puppetsinc.com
P.O. Box 1359
Red Oak, TX 75154

sub-total	
tax 8.25% (texas residents only)	
add'l shipping (if outside the 48 contiguous states)	
total	

Your check will not be deposited or your charge card processed until your order is ready to ship.