

POST-UP STAND QUICK ORDER FORM

\$175 per banner (additional wordage charges may apply)

BILLING INFORMATION:

Company Name: Kairos Prison Ministry

Street Address: _____

(City, State, Zip Code) _____

Phone: _____

Contact Person: _____

Email Address: _____

Shipping Information:

(If Different from Above) _____

Residential or Commercial

Company Name: _____

Address: (Street) _____

(City, State, Zip Code) _____

Phone: _____

Contact Person: _____

***FedEx ground default shipping method unless otherwise noted.**

Credit Card Information:

Credit card information must be completed at the time your order is placed for it to proceed to production. If you prefer faxing this please send to 216-332-0531 OR call 1-800-935-3534 and ask for Nora. If you choose to email your order form, please send it attn. Nora and email it to sales@postupstand.com Please **do not** send credit card information. Call to confirm receipt and provide your credit card information over the phone to Nora (Post-Up Stand Account Manager).

Type of Card: _____

Credit card # _____

Expiration Date: _____ **Code:** _____

Name on Card: _____

Credit Card Address
(if different than billing): _____

Product- (exactly as shown on website)	Quantity	File Name
33x80 Narrow Base		



KAIROS 1



KAIROS 2

Date Needed By: _____

Design Changes To Be Made:

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