Office use only	Date Entered
Customer #	Order #
Check #	Entered by
Check Amt	Checked by

Recipient Name____

______ State _____ Zip__

Address _____

Ship to Address is a ■ Business/School ■ Residence

A WISH COME TRUE® COLOR GUARD & PERCUSSION 2530 PEARL BUCK ROAD, BRISTOL, PA 19007 FAX 800-755-9360 PHONE 800-755-2248



WWW.AWCTCOLORGUARD.COM CE WEAR by A Wish Come True SPECIAL SIZES* TOTAL TOTAL SPECIAL PLEASE USE THIS SIDE OF THE ORDER FORM FIRST CHILD AND ADULT SIZES TOTAL TOTAL *cannot be returned. SPECIAL SIZE QTY. CHILD AND SIZE UNIT PRICE TOTAL ADULT & SPECIAL PRICE CHILD AND UNIT PRICE exchanged, or cancelled SPECIAL ADULT PRICE ADULT QTY. PRICE STYLE # COLOR NAME OF UNIFORM MC LC SA LA XLA XXLA* 3XLA* 4XLA* MA SPECIAL SIZE TOTAL + All orders MUST include at least 50% deposit. Uniforms are NOT returnable. CHILD AND ADULT SIZE TOTAL CHILD & ADULT TOTAL + BILLING AND SHIPPING INFORMATION (PLEASE PRINT) PAYMENT INFORMATION (PLEASE PRINT) PLEASE CHECK ALL BOXES THAT APPLY. TOTAL UNIFORM ORDER : Customer# (as printed on back cover of catalog): _____ ☐ ENTIRE BALANCE ENCLOSED \$25 CUT FEE + Need by date: UNIFORM SUB TOTAL = ☐ CHARGE ENTIRE BALANCE TO MY CREDIT CARD P.O. #: EQUIPMENT TOTAL + ☐ 50% CHECK OR MONEY DEPOSIT ENCLOSED. WHEN ORDER IS COMPLETE: (NO BOOSTER PURCHASE ORDERS WILL BE ACCEPTED) ☐ CHARGE CREDIT CARD FOR BALANCE TOTAL ORDER : BILL TO ☐ WILL SEND CHECK FOR BALANCE DUE (2 WEEKS TO CLEAR) SHIPPING -School Name _____ ☐ CHARGE 50% DEPOSIT TO CREDIT CARD, WHEN ORDER IS COMPLETE: 6% PA SALES TAX + Your Name _____ ☐ CHARGE CREDIT CARD FOR BALANCE GRAND TOTAL = ☐ WILL SEND CHECK FOR BALANCE DUE (2 WEEKS TO CLEAR) 50% DEPOSIT ☐ BACKORDER OK ☐ SHIP COMPLETE ONLY ______ State _____ Zip___ BALANCE DUE = ☐ SIGNED PO (MUST BE ATTACHED) Day phone # _____ Cell phone # _____ CREDIT G & HANDLING CRED School phone # _____ School Fax # ____ ed in full er total shipping fees SECUR ☐ GO GREEN Check box for email confirmation and UPS tracking #. Go paperless! \$99 \$199 SHIP TO (if different than bill to)

		O DISCOURD					
CREDIT CARD INFORMATION		VISA (SECOVER AMERICAN)	49 CONTIC	LIQUE STATES	CHIDDI	NG & HANDLIN	_
CREDIT CARD #			46 CONTIG	OUO SIAIE	SHIFFI	NG & HANDLIN	G
			*When payment is received in full				
SECURITY CODE (PRINTED ON BACK OF CARD)	EXPIRATION DATE		CHARGE	ORDER TOTAL	Single or	der total shipping fe	ees
			\$6	\$1	to	\$99	
		\$10	\$100	to	\$199		
			\$15	\$200	to	\$299	
SIGNATURE	NAME ON CARD		\$20	\$300	to	\$599	
			\$25	\$600	to	\$999	
CREDIT CARD BILLING ADDRESS	CITY, STATE, ZIP		\$35	\$1,000	to	\$1,499	
			FREE*	\$1,500	and	up	
AUTH. CODE (OFFICE USE ONLY)			Rifles and pole	es are subject t	o additio	nal shipping charge	es.
			1	Call for	nricina		

Office use only Customer # Check #	Date Entered Order #
Check Amt.	Entered by Checked by

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EQUIPMENT ORDER FORM PLEASE FILL OUT AND FAX BOTH FORMS IF ORDERING EQUIPMENT. ITEMS FROM DIFFERENT CATALOGS MUST BE ORDERED SEPARATELY.							
	EQUIT MENT ONDER FORM	TELASETIEE OUT AND TAX BOTT TORMS IT ORDER	NG EQUII MENT. I	TEMOT HOW BITTE	TENT ONTALOGS MOST BE OND	THE SELABATEET.	
STYLE #	COLOR	ITEM DESCRIPTION (Include end cap color for flag poles)	FLAG POLE LENGTH	GLOVE OR SHOE SIZE	TOTAL QTY. UNIT PRICE	TOTAL PRICE	
TOTAL PRICE =							
RIFLES AND FLAGS ARE SUBJECT TO ADDITIONAL SHIPPING CHARGES. CALL FOR PRICING.			OVERSIZE SHIPPING + SEE CHART FOR RATES				
			EQUIPMENT TOTAL = COPY THIS TOTAL ONTO THE PAGE 4 ORDER FORM				
					SCHOOL NAME		
IMPORTANT! Remember to add your equipment total to your uniform total on the front of the order form. You MUST complete the front of the order form, even if you are only ordering equipment.			YOUR NAME				
			DAY PHONE NUMBER OR CELL PHONE NUMBER				