

**CBC ALUMNI ORDER FORM**

Contact: Debbie R. or Pastor Ed  
410 634-9005

**Shipping Address**  
Name

**Email Address**

**Address**

**City**

**State/Province**

**Country**

**Zip/Post Code**

**Daytime Phone**

**Billing Address** *(as it appears on your credit card)*

Check if same as above

**Name**

**Address**

**City**

**State/Province**

**Country**

**Zip/Post Code**

**Billing Phone**

**Email Address**

# ORDERING INFORMATION

T-Shirts \$19.00

Product Number	Qty	Item Description	Price Each	Total
		SMALL		
		LARGE		
		MEDIUM		
		X LARGE		
		XX LARGE add \$2.00		
<b>Merchandise Total</b>				
<b>Shipping/Handling</b> <i>(see chart below)</i>				
<i>Shipping to more than one address add \$2.50 per address</i>				
<b>TOTAL</b>				
<b>Method of Payment</b> <i>(Check one)</i>				
<input type="checkbox"/> Check or money order <input type="checkbox"/> Visa <input type="checkbox"/> Discover <input type="checkbox"/> American Express <input type="checkbox"/> Master Card <input type="checkbox"/> JCB				
Account Number			Expiration Date	
Signature:				