



Business _____
 Contact person _____
 Address _____
 Suburb/Town _____
 Postcode _____

Telephone _____
 Fax _____
 email _____

Order Date ____ / ____ / ____

- Type of Glass**
- | | | |
|---------------------------------------|--|--------------------------------------|
| <input type="checkbox"/> Spirit | <input type="checkbox"/> Champagne Flute | <input type="checkbox"/> Sherry/Port |
| <input type="checkbox"/> Beer/Tumbler | <input type="checkbox"/> Shot Glass | <input type="checkbox"/> |
| <input type="checkbox"/> Wine Taster | <input type="checkbox"/> Wine Glass | <input type="checkbox"/> |

Quantity

Written eg Two

Graphics

- Required Supplied

Graphic number

Details required eg names, dates,

Font/s

Some fonts may not be appropriate for etched work.

Date required / /

Please ensure order complies with requirements as set out in brochure

Delivery Instructions

Packaging Instructions

Note If specific layouts are required, eg logos, names, clip art, these maybe faxed or emailed. hand written messages.