

The Orchid Trail – Order Form
 402 Church St., Morrisville, NC 27560,
 Phones: 919-362-1062 (John Stanton), 919-337-3750 (Paul Feaver)
 Fax: 919-468-3088 Email: OrchidTrail@OrchidTrail.com

Order Date: _____

Billing information:
 Name: _____
 Address: _____
 City, State ZIP: _____
(NO shipping to Hawaii, Alaska or Arizona)
 Phone: _____
 Other phone: _____
 Email: _____

Shipping information (if different from Billing):
 Name: _____
 Address: _____
 City, State ZIP: _____
(NO shipping to Hawaii, Alaska or Arizona)
 Phone: _____
 Other phone: _____
 Email: _____

VERY IMPORTANT: Please provide a **current phone number or email address** in case we need to contact you while processing or shipping your order.

Quantity	ID	Orchid Description (or Grower's Special Number)	Price	Total

May we substitute an item of equal or greater value if one you ordered is not available? Yes ___ No ___

Total: \$ _____

Shipping

Orders are normally sent U. S. Post Office Priority Mail. Actual postage or FedEx charges will be billed or charged separately.

Packing (add 5% of Total): _____

Sales tax (NC residents add 6.75% of subtotal): \$ _____

Total Remitted: \$ _____

Payment

Your credit card will not be charged until the day before we ship your order.

Card Security

Do not email or fax your card information.

We will call you for this when we are ready to ship.

If you prefer, we can send you a **PayPal invoice**.