

## CAP AND T-SHIRT ORDER FORM

**\*\*Call (205) 624-2225 to verify size and color availability\*\***

Packages will be sent via the U.S. Mail. Please allow 2-4 weeks for delivery.



Name \_\_\_\_\_ Home Telephone \_\_\_\_\_ Work Telephone \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Email Address \_\_\_\_\_

# of Caps _____	x \$19.00 = _____.	Cap color: _____	
# of Caps _____	x \$19.00 = _____.	Cap color: _____	
# of Caps _____	x \$19.00 = _____.	Cap color: _____	
# of Short Sleeve T's _____	x \$16.00 = _____.	SST Size: _____	SST Color: _____
# of Short Sleeve T's _____	x \$16.00 = _____.	SST Size: _____	SST Color: _____
# of Long Sleeve T's _____	x \$19.00 = _____.	LST Size: _____	LST Color: _____
# of Long Sleeve T's _____	x \$19.00 = _____.	LST Size: _____	LST Color: _____
Total Amount Due: <i>(tax included)</i>		\$ _____.	<b>Mail payment (check, money order, or credit card information) and order form to: AFOA - Cap/Shirt, P.O. Box 361434, Birmingham, AL 35236</b>

A credit card may not be used to pay for any of AFOA's Group Insurance Liability Policies.

**AFOA applies a 3.63% + \$0.31 convenience fee to all credit card transactions**

Credit Card Information (Please fill out all the information) MasterCard or Visa Only Amount \$ \_\_\_\_\_  
(Circle One)

Credit Card Number \_\_\_\_\_ Expiration Date MM/YYYY \_\_\_\_\_

Security Code (3 digits on back of card) \_\_\_\_\_ Name as it appears on card \_\_\_\_\_

Zip Code \_\_\_\_\_ Phone Number ( ) \_\_\_\_\_ **AFOA USE ONLY BELOW THIS LINE**

Link#/Adv# \_\_\_\_\_ Inv# \_\_\_\_\_ Inv \$ \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_