

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: (tax included) \$ _____ . _____

**Mail payment (check, money order, or credit card information)
and order form to:**

AFOA - Cap/Shirt, P.O. Box 361434, Birmingham, AL 35236

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: ____/____/____