



FRONT

# “RECYCLE YOURSELF” T-SHIRT ORDER FORM

Credit Card Payments: Forms may be faxed to Jennifer Lange at: 303-300-9157



BACK

## CONTACT INFORMATION

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address 1: \_\_\_\_\_

Address 2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Primary Phone: ( ) \_\_\_\_\_ - \_\_\_\_\_ Home ( ) Cell ( ) Work ( ) Other ( )

Alt. Phone: ( ) \_\_\_\_\_ - \_\_\_\_\_ Home ( ) Cell ( ) Work ( ) Other ( )

## T-SHIRT OPTIONS (Please indicate desired t-shirt quantity below):

Youth Medium: \_\_\_\_\_ Adult Small: \_\_\_\_\_ Adult Medium: \_\_\_\_\_

Adult Large: \_\_\_\_\_ Adult X-Large: \_\_\_\_\_ Adult XX-Large: \_\_\_\_\_

TOTAL Quantity: \_\_\_\_\_ (x \$10) = TOTAL Due: \$ \_\_\_\_\_

## PAYMENT OPTIONS (VISA, MC, DISCOVER, check or money order):

Name on card: \_\_\_\_\_ CC# \_\_\_\_\_ Exp. Date: \_\_\_\_\_

VISA

MasterCard  
(circle one)

Discover

Please make check or money order payable to Donor Alliance and mail to:

*Donor Alliance, Attn: Jennifer Lange, 720 S. Colorado Blvd., Suite 800-N, Denver, CO 80246*

PLEASE NOTE: ALL ORDERS WILL BE PROCESSED AND DELIVERED WITH 6-8 WEEKS.