



# secprint

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# WRISTBAND ORDER FORM

COMPANY NAME	CONTACT NAME	TELEPHONE No.	FAX No.	EMAIL ADDRESS

INVOICE ADDRESS
C <sup>o</sup> NAME: _____
ADDRESS: _____
_____
_____
POST CODE: _____

DELIVERY ADDRESS - MUST BE COMPLETED TO RECEIVE TICKETS
NAME / FAO: _____
ADDRESS: _____
_____
_____
POST CODE: _____

DATE ORDERED	DATE REQUIRED
PURCHASE ORDER	

### SOLID COLOURS AVAILABLE (PLEASE TICK BOX)

<b>BLUE</b>	TICK HERE	QUANTITY
	<input type="checkbox"/>	<input type="text"/>

<b>GREEN</b>	TICK HERE	QUANTITY
	<input type="checkbox"/>	<input type="text"/>

<b>GOLD</b>	TICK HERE	QUANTITY
	<input type="checkbox"/>	<input type="text"/>

<b>ORANGE</b>	TICK HERE	QUANTITY
	<input type="checkbox"/>	<input type="text"/>

<b>PINK</b>	TICK HERE	QUANTITY
	<input type="checkbox"/>	<input type="text"/>

<b>PURPLE</b>	TICK HERE	QUANTITY
	<input type="checkbox"/>	<input type="text"/>

<b>RED</b>	TICK HERE	QUANTITY
	<input type="checkbox"/>	<input type="text"/>

<b>SILVER</b>	TICK HERE	QUANTITY
	<input type="checkbox"/>	<input type="text"/>

<b>WHITE</b>	TICK HERE	QUANTITY
	<input type="checkbox"/>	<input type="text"/>

<b>YELLOW</b>	TICK HERE	QUANTITY
	<input type="checkbox"/>	<input type="text"/>

PLEASE ENTER YOUR CUSTOM DESIGN OVERPRINT IN THE BLANK SPACE BELOW (DO NOT USE THE SHADED AREAS) - WRISTBAND SIZE = 25mm x 250mm

X --- X	
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X --- X	
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OVERPRINT COLOUR WILL BE BLACK. OTHER COLOURS ARE AVAILABLE SUBJECT TO WRISTBAND COLOUR CHOSEN.