Order Form

Please print this form and mail or fax it to the Sagamore Council Scout Shop. This form cannot be completed online.

Name:

Address:

City: State: Zip:

Daytime Phone Number:

Qty	Item #	Description	Price Each	Total Price
			Sub Total	
			Shipping	
			Total	

Form of Payment

Cash or Check (make check payable to Sagamore Council)

Visa Mastercard Discover

Card #

Expiration Date:

Card Holder Signature:

Charge to Unit Account: Y or N Unit #

Account Holder Signature:

For Office Use Only

Date Received in Store: Date shipped:

Comments:

Need more space? Write additional item information on a spearate page and attache to order form.

Mail to: PO Box 865, Kokomo, IN 46903-0865 or Fax 765-459-5625