HeartSpace · ORDER FORM

Your Full Name _____

Address _____

_____ City/Town _____

State _____ Postcode (Zip) _____ Country _____

E-Mail Address _____ Daytime Tel. No. _____

Method of Payment ☐ Cheque ☐ Mastercard ☐ VISA

Credit Card Number _____ Date of Expiration _____

Signature *(Required on all credit card orders)* _____

	PRODUCT CODE	DESCRIPTION	PRICE PER UNIT	QUANTITY	VALUE
1.					
2.					
3.					
4.					
5.					
6.					
7.					

Merchandise Total USD$ _____

Shipping Charges (Sent US Postal) USD$ _____

Order Total USD$ _____

ERRORS AND OMISSIONS ACCEPTED. US $20.00 CHARGE ON ALL RETURNED CHEQUES AND CREDIT CHARGEBACKS.
OVERSEAS ORDER OTHER THAN CREDIT CARD, PLEASE USE INTERNATIONAL POSTAL ORDER OR INTERNATIONAL BANK CHEQUE.
THANK YOU FOR YOUR ORDER.