LIFESAVING SOCIETY
The Lifeguarding Experts

GENERAL ORDER FORM

Invoice to name:	Ship to:
Mailing address:	Street address (please do not use post office box)
City Prov Postal code	City Prov Postal code
Ordered by:	Attention:
Phone:	Phone:
Date ordered:	Date required:
Payment: Cheque ☐ Money order ☐ Purchase order # ☐	VISA ☐ Debit ☐ MasterCard ☐ AMEX ☐
Credit Card # Expiry date	Cardholder's name Cardholder's signature
In person, we also accept debit and cash	

Items are shipped prepaid. Shipping charges will be added to your bill. If you require an estimated shipping cost, please call us at 416 490 8844. PST & GST extra.

QUANTITY	CODE	ITEM	PRICE	TOTAL
			SUB TOTAL	
			SHIPPING	
			TAX	
			TOTAL	

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