

Please complete this form in BLOCK CAPITALS. Additional order forms are available for download @ www.christmas2u.ie. Fill in your details & hand the form to your agent.

New Account * Yes ☐ No ☐
(Please tick)

Customer Name *

Home Phone Number *

Account Number

Mobile Number *

Account Name

Customer Address *
Address Line 1
Address Line 1
Town County
Eircode

Email *

* Denotes Required Field

| Page No | Code | Product Name | Quantity | Total Price | Price per Week |
|---------|------|--------------|----------|-------------|----------------|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

PERSONALISATION ORDERS ONLY Order cannot be processed unless personalised details are provided

| Page No | Code | Product Name | Quantity | Total Price | Price per Week |
|---------|------|--------------|----------|-------------|----------------|
| | | Product 1 | | | |
| | | Product 2 | | | |
| | | Product 3 | | | |
| | | Product 4 | | | |

Personalisation **Product 1** Details

Personalisation **Product 2** Details

Personalisation **Product 3** Details

Personalisation **Product 4** Details

RING ORDERS SECTION Order cannot be processed unless ring size details are provided

| Page No | Code | Ring Size | Product Name | Quantity | Total Price | Price per Week |
|---------|------|-----------|--------------|----------|-------------|----------------|
| | | | | | | |
| | | | | | | |
| | | | | | | |

Customer Signature * Date

Agent Signature * Date

Deposit: 1st weeks payment must be paid to secure your order