

Flyers Unlimited

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 stephen@flyersunlimited.net •
 www.flyersunlimited.net

Silk Screen / Embroidery

CLIENT INFORMATION

Contact Person: _____
 Company: _____
 Address: _____
 City, St, Zip: _____
 Office Phone: () _____
 Fax Number: () _____

TURNAROUND INFORMATION

Normal () *Rush ()
 Laser Proof Yes () No ()
 Fax Proof Yes () No ()
 Start Date _____ Need By _____
 Finish Date _____

Apparel Type	Apparel Color	Numer of Colors	QTY	S	XL
		Colors		M	XXL
Maker	Apparel Style #			L	
Apparel Type	Apparel Color	Numer of Colors	QTY	S	XL
		Colors		M	XXL
Maker	Apparel Style #			L	

Artwork location

Full Front ()

On Pocket ()

Above Pocket ()

Left Breast ()

Right Breast ()

Front

Back

Sleeve

Full Back ()

Between Shoulders
Blades ()

Numbered ()

Named ()

<h3>Approval to Begin Work</h3> <ul style="list-style-type: none"> I understand that one (1) proofing is included in the price. I understand that changes to my original order will require an additional fee. I approve the order as placed and request that work begin. I understand that all art / layouts are the property of Flyers Unlimited until time of full payment . <p>SIGNATURE _____ DATE ____/____/____</p>	Design art work Hourly () X () = Scannings 6.95ea. X () = Clipart \$5.00ea. X () = Tape Charge Rush Charge: 75.00 = Screen/s () X () = Apparel Cost () X () = Names () X () = Print () X () = Sub TOTAL Sales Tax Shipping Total Deposit of 50% Amount Due
<h3>Final Approval</h3> <ul style="list-style-type: none"> I have proofed and approve the finished work. I am responsible for any errors from this point on or further changes. I am responsible for any damage to data on disk or Items that I take with me. <p>SIGNATURE _____ DATE ____/____/____</p>	