

## Exploring Art Mail In Order Form

**Personal Information:**

**Full Name:** \_\_\_\_\_

**Billing Address:**  
\_\_\_\_\_  
\_\_\_\_\_

**Phone Number:** ( \_\_\_\_\_ ) - \_\_\_\_\_ - \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**Fax Number:** ( \_\_\_\_\_ ) - \_\_\_\_\_ - \_\_\_\_\_

**Order:**

**Lesson Plans**

	Title(s)	Quantity		Price	Cost
1.	_____	_____	@	_____	_____
2.	_____	_____	@	_____	_____
3.	_____	_____	@	_____	_____
4.	_____	_____	@	_____	_____
5.	_____	_____	@	_____	_____

**Supply Kits**

<b>Title(s)</b>					
1.	_____	_____	@	_____	_____
2.	_____	_____	@	_____	_____
3.	_____	_____	@	_____	_____
4.	_____	_____	@	_____	_____
5.	_____	_____	@	_____	_____

**Shipping**  
(10% of total order) \_\_\_\_\_  
**Tax 8.25%**  
(CA Residents only) \_\_\_\_\_  
  
**TOTAL** \_\_\_\_\_

**Payment Information:**

**Shipping Address:** (if different from above)

**Full Name** \_\_\_\_\_

**Address**  
\_\_\_\_\_  
\_\_\_\_\_

**Phone Number:** ( \_\_\_\_\_ ) - \_\_\_\_\_ - \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**Fax Number:** ( \_\_\_\_\_ ) - \_\_\_\_\_ - \_\_\_\_\_

**Type of payment:**  Check  Money Order (made out to Exploring Art)

**Credit Card:**  MasterCard  Visa (please check one)

**Credit Card Number:** \_\_\_\_\_  
**expiration** \_\_\_\_\_

**Name as it appears on card:**  
\_\_\_\_\_

**Signature:** \_\_\_\_\_

**\*When ordering by personal check, items will ship after check has cleared\***

**Disclosure:**

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**Send Payment to:**

Exploring Art  
27016 Fond du Lac  
Rancho Palos Verdes, CA 90275  
Phone 310.796.9317  
Fax 310.796.9318