FROM: Please Print

Mr. ❑ Miss ❑
Mrs. ❑ Ms. ❑ Your Name: _____

Street Address: _____

City: _____ Province: State: _____ Postal Code: Zip Code: _____

Country: _____ Tel: Res. ( ) _____

Tel. Cell ( ) _____ Tel. Bus. ( ) _____

Email _____

SEND TO:

Rogers' Chocolates Ltd.
4253 Commerce Circle
Victoria, BC V8Z 4M2
Canada

www.rogerschocolates.com
Phone: 250-384-7021
Fax: 250-384-5750

TOLL FREE:
1-800-663-2220

METHOD OF PAYMENT:

❑ Visa ❑ Mastercard ❑ American Express ❑ Discover ❑ Cheque/Money Order

Credit Card Number _____ *CVV* _____

Expiry Date: Mo. _____ *Yr.* _____

Name on Credit Card: _____

Signature: _____

SEND ROGERS' CHOCOLATES TO:

If you are sending gifts to more than 3 recipients, please use a separate sheet or copy this one. Please use street addresses for USA and international destinations (no PO Box numbers).

Name: / Address: / City: (Postal Code: Zip Code:) / Province/State: (Country:) / Phone #: ( ) (*For delivery purposes only*)	Quantity	Item #	Description	Price

Ship Via: ❑ Local Delivery ❑ Canada-Ground ❑ Canada-Air ❑ USA-Ground ❑ USA-Air ❑ International Air

Date to Arrive (M/D/Y): / / (May be adjusted by our staff to reflect delivery delays relative to your selected destination.)

Gift Message 1:

Total Product:
Shipping Cost: (refer to reverse of this form)
Subtotal:
Plus Applicable Taxes: (refer to reverse of this form)
Total:

Name: / Address: / City: (Postal Code: Zip Code:) / Province/State: (Country:) / Phone #: ( ) (*For delivery purposes only*)	Quantity	Item #	Description	Price

Ship Via: ❑ Local Delivery ❑ Canada-Ground ❑ Canada-Air ❑ USA-Ground ❑ USA-Air ❑ International Air

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Subtotal:
Plus Applicable Taxes: (refer to reverse of this form)
Total:

Grand Total: