

Knife Order Form

Name _____

Method of Payment: [] Check (made to: EANGTN) [] Cash [] Credit Card (please specify)
[] Visa [] Master Card [] Discover

Credit Card Number _____

Expiration Date _____ Security Code _____

Credit Card Billing Address _____

E-Mail _____ Day Phone Number _____



Each Knife is \$20.00 (\$25.00/knife if Mailed)

Quantity of Knives _____

Total \$ _____

Signature: _____

Mailed? (\$25.00/knife) [] YES [] NO

Address (if different from above) _____

NOTE:

There is a 2.5% administrative fee for all Credit Cards.
There is a \$25.00 fee on all Returned Checks.

Please return to EANGTN
4332 Kenilwood Dr, Nashville, TN 37204
Or Email to melissa@eangtn.org
Or Fax to Melissa at 615-620-7256