



Friends for All Seasons

2014 Calendar Order Form

Name _____

Mailing Address _____

City _____ State _____ Zip _____

Phone Number _____ ☐ Cell ☐ Home ☐ Other _____

Email _____



DSAGSL "Friends for All Seasons" 2014 Calendars (9" x 12")

Quantity _____ x \$10 each = \$ _____

☐ Yes, ship to me at \$2 per calendar = \$ _____

☐ I will pick up my order at the DSAGSL office (after December 8, 2014)

Total Amount = \$ _____

Payment Method: Cash _____ Check# _____ Credit Card _____ (fill-out box below)

Credit Card Type - ☐ Visa ☐ MasterCard ☐ Discover ☐ AmerEx

Card Number _____ Exp Date _____ CSC* _____

Billing Address (If different from above) _____

Signature _____

*Card Security Code is a 3 or 4 digit number that is not part of the card number.

Return this form to: Down Syndrome Association of Greater St. Louis • 8420 Delmar Blvd, Suite 200
St. Louis, MO 63124 • Phone (314) 961-2504 • Fax (314) 989-1579 • info@dsagsl.org