



General Date Selection ORDER FORM

Send To:

Name _____
Address _____
City, State, Zip _____
Phone _____
Email _____

About Person #1 Involved in Event:

Name _____
Birthdate _____
(DD/MM/YY, plus birth time if born between Feb 2-4)
Gender Male Female

About Person #2 Involved in Event:

Name _____
Birthdate _____
(DD/MM/YY, plus birth time if born between Feb 2-4)
Gender Male Female

(Enclose additional pages for additional key people involved in event.)

Event Information:

Type of Event _____
Approximate Planning Date _____

<p>PRICE LIST</p> <p>Date Selection (\$60)</p> <p>Qty: _____</p> <p>TOTAL ENCLOSED:</p> <p>_____</p>

PAYMENT INFORMATION (Or you may call Alphega Living Concepts at (425) 836-1131, if you prefer.)

Visa/MC/AmEx: Signature _____
Name (as appears on card) _____
Card Number _____ Exp. Date _____



Please complete form and send, including payment or credit card information, to:
Alphega Living Concepts 23316 N.E. Redmond-Fall City Road, #490, Redmond, WA 98053-8376
Or, fax to Alphega Living Concepts, (425) 836-1141
Checks, Visa, MasterCard, and American Express accepted.
If registering/placing order electronically, please call Alphega Living Concepts, at (425) 836-1131, to provide credit card information.