



By Phone: In the US Toll Free 1-888-777-5433
 Outside the US (US)+914-767-0295
 By Fax: (US)+914-232-4831
 On the Web: www.flightjacket.com
 By Mail: P O Box 51, Goldens Bridge NY 10526

| 1 ORDER BY | | | | 2 SHIP TO <input type="checkbox"/> SAME AS "ORDER BY" | | | |
|---|--------|-------------|-------|--|-------|---|-------|
| NAME _____ | | | | NAME _____ | | | |
| ADDRESS _____ | | | | ADDRESS _____ | | | |
| CITY | STATE | COUNTRY | ZIP | CITY | STATE | COUNTRY | ZIP |
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| 3 ORDER INFORMATION | | | | | | | |
| Page | Item # | Description | Color | Size | Price | Quantity | Total |
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| 4 METHOD OF PAYMENT | | | | 5 SHIPPING & HANDLING | | ORDER TOTAL | |
| <input type="checkbox"/> Personal Check <input type="checkbox"/> Money Order <input type="checkbox"/> Gift Certificate <input type="checkbox"/> Visa/Mastercard <input type="checkbox"/> Discover <input type="checkbox"/> AmericanExpress | | | | <u>Order Total</u> <u>Add</u> \$ 0 - 60.00 \$ 8.00 \$ 60.01 - 131.00 \$12.95 \$ 131.01 - 300.00 \$ 18.95 \$ 300.01 - 450.00 \$ 21.95 \$ 450.01 - 550.00 \$ 24.95 \$ 550.01 - 900.00 \$ 38.95 | | US Shipping/Handling | |
| _____ Credit Card Account Number Expiration Date | | | | We normally ship within 2 days. For 2nd Day delivery, add \$10.00. For Overnight Delivery, add \$25.00 For International shipping rate, visit our web site or contact us. | | 2nd Day Delivery | |
| _____ Signature (as shown on Credit Card) | | | | _____ TOTAL | | Overnight Delivery | |
| _____ Signature (as shown on Credit Card) | | | | _____ TOTAL | | Canadian Delivery | |
| _____ Signature (as shown on Credit Card) | | | | _____ TOTAL | | Delivery in NY add all applicable Sales Tax | |
| _____ Signature (as shown on Credit Card) | | | | _____ TOTAL | | TOTAL | |

All prices are subject to change without notice

THANK YOU FOR YOUR ORDER

SEND A U.S. AUTHENTIC TO YOUR FRIENDS...

For A FREE Catalog, simply print their name and address below:

NAME

ADDRESS:

CITY STATE COUNTRY ZIP

I took my measurements in Inches Centimeters

LB (pounds) Kg (Kilograms)

My weight is: _____ My height is: _____

My Chest (CH): _____ My Shoulder (SH): _____

My Sleeve (SL): _____ My Center Back (CB): _____