

Book Order Form

Mail/Fax to: The Playwrights' Center
 2301 Franklin Avenue East
 Minneapolis, MN 55406-1099
 Phone: 612/332-7481
 Fax: 612/332-6037

Order Information

Author: _____

Title: _____

Contact Information

Name _____

Shipping Address _____

City _____ State _____ Zip _____

Telephone No. _____ Email _____

Payment Information

Credit Card	Check	Cash
<p><i>Card Type</i></p> <p><input type="checkbox"/> Visa <input type="checkbox"/> Mastercard</p> <p><i>Account No.</i></p> <p>_____</p> <p><i>Name on Card</i></p> <p>_____</p> <p><i>Billing Address (if different than shipping address):</i></p> <p>_____</p> <p>_____</p> <p>_____</p> <p><i>Amount</i></p> <p>\$ _____ . _____</p>	<p><i>Check No.</i></p> <p>_____</p> <p><i>Amount</i></p> <p>\$ _____ . _____</p>	<p><i>Amount</i></p> <p>\$ _____ . _____</p>

Office Use: Rec'd By _____

Date Shipped _____