

# Gift & Loyalty Card Program | Reorder Form

Fax this form to: (877) 337 - 9516

For assistance in locating your sales office contact: (888) 481 - 0757

ISO Name: \_\_\_\_\_ ISO#: \_\_\_\_\_ Sales Agent: \_\_\_\_\_ Date: \_\_\_\_\_

MERCHANT INFO

Merchant Name: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Shipping Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

## Card Type

Please choose from one of the following 4 card type options:

1) Same design and type as my existing cards.

2) Upgrade to a different PreDesigned card type (\$25.00 design change fee applies)

Please select a new PreDesigned card type below:



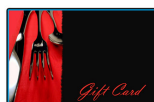
Thank you



Happy Bday



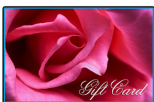
Congratulations



Restaurant



Aurora



Rose



Retail



Red Bow



Cash



Gift Box



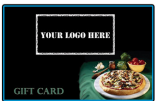
General

3) Upgrade to a different Logo card type (\$75.00 plate fee applies)

Submit your merchant logo to [art@giftcardtraining.com](mailto:art@giftcardtraining.com). Please select a new Logo card design below:



Aqua



Pizzeria



Botanic



Universal



Present



Vehicle



Jewel



Manicure



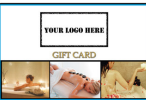
Haircut



Exercise



Cafe



Unwind

4) Upgrade to a different Custom card type (\$75.00 plate fee applies)

Please submit your Custom design to [art@giftcardtraining.com](mailto:art@giftcardtraining.com).

## Card Quantity

100  500  1000  Other\* (please specify) \_\_\_\_\_

\*100 card minimum.

Cost Per Card †: \$ \_\_\_\_\_

† Required to process order.

## Marketing Materials

Type:	Card Carriers	Round Decal	Acrylic Display	Static Window Cling	Table Tent
Cost:	\$0.20 each	\$1.00 each	\$6.50 each	\$2.50 each	\$2.50 each
Quantity:	_____	_____	_____	_____	_____

## Billing Info & Totals

Bill To: \_\_\_\_\_ (Choose a billing method below)

I authorize GETI to debit the following account for any and all fees related to this particular order form (cards, shipping, plate, items, etc)

Bank Account Currently On File **OR**

Credit Card #: \_\_\_\_\_ Exp Date: \_\_\_\_/\_\_\_\_

Signature: \_\_\_\_\_ (Required if billing merchant)

### Subtotal

Cards \$ \_\_\_\_\_

Marketing Items \$ \_\_\_\_\_

Shipping \$ To Be Determined

Ground  2nd Day  Next Day

**Grand Total:** \$ \_\_\_\_\_

REORDER INFORMATION