

Name Rider Order Form

Maximum 3 Lines of text

PLEASE COMPLETE THE ABOVE RIDER AS YOU WOULD LIKE THEM SCREENED - PLEASE PRINT

PLEASE **CIRCLE** CHOICE

Color of Letters: RED BLACK LIGHT BLUE DARK BLUE

Quantity: 10 20 30 40 40+

Size: 6" x 18" or 6" x 24"

PLEASE NOTE:

Default color: Red letters on white background

Default size: 6 mil. White coroplast 6" X 24"

GROMMETS: 30¢ ea. (optional)

Grommet Placement

IMPORTANT

Please mark diagram for placement including dimensions

SHIPPING INFORMATION

Agent Name: _____ Day Phone: _____

Company Name: _____ Fax Number: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Email Address: _____

Credit Card #: _____ Exp Date: _____

Security Code: _____

Billing Address: _____

INFORMATION MUST BE COMPLETE FOR ORDER VALIDATION!

Signature: _____

Must Have Signature



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Fax completed form to:
(714) 229-0904



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#: _____ REP: _____ DATE: _____