Order Form



Your Details

Delivery Details

Name (Mr/Mrs/Ms/Miss): Home Address:						
Postcode	: Telephone	<u>):</u>				
Email Address:			Postcode:	Te	Telephone:	
Prod	uct Details					
Code	Description	Size	Colour	Quantity	Unit Cost	Total Cost
				Promotional Code:(If applicable)		
					Cost:	
Payment Details				TOTAL ORDER VALUE:		
•	By Credit Card: Visa / Ame	x / Mastercard / Maes	tro (Issue No:)		
Card Num	nber:		Expi	ry:	Start:	
Signature:						
Pay	By Cheque: please make p	payable to Zaliwana Ad	ccessories			

Please post this form to: 6 Kenilworth Gardens, Staines-Upon-Thames, Surrey, TW18 1DR For delivery costs: please check our website www.zaliwanaaccessories.co.uk for costs Terms & Conditions: please see our website for our full terms & conditions

