



Name Sign Order Form

DATE: _____ NAME: _____

(PLEASE PRINT LAST NAME CLEARLY) If you have two last names, please use the following example: SMITH / JONES

I AM ORDERING A METAL NAME SIGN FOR MY HOME AND SUBMITTING PAYMENT OF \$50.00 PLUS TAX (Total \$53.50) WITH THIS FORM (TAXES INCLUDED). IT WILL TAKE APPROXIMATELY 4 - 7 WEEKS TO PROCESS YOUR REQUEST AND INSTALL YOUR NEW NAME SIGN. ONE OF OUR EXPERIENCED TECHICIANS WILL BE INSTALLING YOUR NAME SIGN AT THE ADDRESS LISTED BELOW, SO PLEASE MAKE SURE THAT YOUR INFORMATION IS CORRECT. (FOR YOUR CONVENIENCE, YOU DO NOT NEED TO BE HOME.)

Address: _____ Check Number: _____

Email: _____ Phone Number: _____

OFFICE USE ONLY: SPECIAL NOTES: _____

SERVICE TECH INTIALS: _____ DATE INSTALLED: _____ NBL: _____ LETTER COLOR: _____

Facility Bracelet Order Form

A Facility bracelet provide access to our pools and fitness centers. Each bracelet is \$7.00 plus tax (Total \$7.49) and it's yours to keep. Resident bracelets and guest bracelets are different from each other. Fill out the information below and drop this form with a check or money order into the black drop box outside Orchid Club Lobby doors. Someone will contact you to schedule a day for delivery. Please be sure to state how many you would like of each.

Resident: _____ Guest: _____ Check Number: _____ Phone #: _____

Name: _____ Email: _____

Address: _____