



Parts Order Form



To process an order, please FAX the completed form AND a completed credit card authorization form to: 212.953.1117.

<u>Quantity</u>	<u>Description</u>	<u>Price Each</u>	<u>Total Cost</u>
Fittings & Hardware			
_____	Top Corner Tee	\$3.50 x Quantity =	_____
_____	Center Slip Tee	\$3.50	_____
_____	Foot Cap	\$2.25	_____
_____	Bottom Corner Tee	\$3.50	_____
_____	Foot Slip Tee	\$3.50	_____
_____	Rotating Foot Mechanism	\$6.85	_____
_____	Complete Mesh Grid Section	\$25.50	_____
_____	Rivets	\$0.10	_____
_____	Self Tapping Screw	\$0.10	_____
_____	Complete Assembled Foot for TECHNO TIP	\$17.85	_____
	(with corner tee, foot slip tee, rotating foot mechanism, foot, and foot caps)		
_____	Screw washer & nut for folding joint	\$1.50	_____
_____	Folding elbow joint	\$4.50	_____
PVC Pipe Sections			
_____	Post for SportPanel	\$12.50	_____
_____	Rail for SportPanel	\$14.75	_____
_____	Center Upright	\$10.10	_____
_____	Foot	\$5.20	_____
Accessories			
_____	Foam Connector	\$24.00 /dz	_____
_____	Anchoring Wicket	\$19.00 /dz	_____
_____	10ft Yellow Safety Rail Section (Must be cut by user to size)	\$8.75	_____
		Total*	_____

*Applicable Shipping and Taxes (in NY only) will be added to the total

Company Name: _____ Contact: _____

Ship to address: _____

Bill To (if different): _____

Telephone: _____ Fax: _____ Email: _____

Note: All parts orders must be accompanied by the Signature Credit Card Charge Authorization Form



Credit Card Authorization Form

Date: _____

I _____, authorize Signature Systems, LLC.
(print name)

to charge my credit card in the amount of \$ _____ (fill in total)

Type of credit card: (circle one) **Visa** **Mastercard** **American Express**

Credit Card # _____ Exp _____ / _____

Signature _____

Name as it appears on credit card _____

BILLING INFORMATION

(Company name and billing address as it appears on credit card statement - required for verification purposes)

Company Name _____

Billing Address _____

City _____ State _____ Zip _____

Telephone _____ Fax _____

SHIPPING INFORMATION

Shipping Address is the same as the billing address

SHIP TO ADDRESS (if different than billing address):

Please fax this form to: 212.953.1117 or mail this form to:
Signature Systems, 50 E. 42nd Street, Suite 501, NY NY 10017