



509 Lillian Avenue \* Syracuse, NY 13206  
 Toll Free: 1-877-701-3030 \* Fax: 315-701-1130

FANHANDS.COM

**HOW TO ORDER:**

1. Fill out Grid Below with colors & sizes
2. Fill out credit card information
2. Fill out contact information

| Choose Color & Quantity: | Youth<br>S/M | Youth<br>L/XL | Adult<br>S/M | Adult<br>L/XL | QTY | WHOLESALE<br>PRICE (EACH) | TOTAL |
|--------------------------|--------------|---------------|--------------|---------------|-----|---------------------------|-------|
| Black Gloves/White       |              |               |              |               |     | \$5.99                    |       |
| Dark Green Gloves/White  |              |               |              |               |     | \$5.99                    |       |
| Kelly Green Gloves/White |              |               |              |               |     | \$5.99                    |       |
| Maroon Gloves/White      |              |               |              |               |     | \$5.99                    |       |
| Navy Blue Gloves/White   |              |               |              |               |     | \$5.99                    |       |
| Orange Gloves/White      |              |               |              |               |     | \$5.99                    |       |
| Pink Gloves/White        |              |               |              |               |     | \$5.99                    |       |
| Purple Gloves/White      |              |               |              |               |     | \$5.99                    |       |
| Red Gloves/White         |              |               |              |               |     | \$5.99                    |       |
| Royal Blue Gloves/White  |              |               |              |               |     | \$5.99                    |       |
| Yellow-Gold Gloves/White |              |               |              |               |     | \$5.99                    |       |
| Other Colors             |              |               |              |               |     | \$5.99                    |       |
| Other Colors             |              |               |              |               |     | \$5.99                    |       |
| Other Colors             |              |               |              |               |     | \$5.99                    |       |
| SALES TAX                |              |               |              |               |     |                           |       |
| SHIPPING                 |              |               |              |               |     |                           |       |
| TOTAL PAYMENT            |              |               |              |               |     |                           |       |

**CREDIT CARD INFORMATION**

|                                                                                                                                |  |
|--------------------------------------------------------------------------------------------------------------------------------|--|
| Name on Card:                                                                                                                  |  |
| Master Card or Visa:                                                                                                           |  |
| Credit Card Number:                                                                                                            |  |
| 3 Digit Security Code (on back of card):                                                                                       |  |
| Expiration Date:                                                                                                               |  |
| TAX ID # (if applicable):<br>(Please fax or e-mail copy of Tax ID Form)                                                        |  |
| Signature: _____ Date: _____                                                                                                   |  |
| Print:                                                                                                                         |  |
| Signed:                                                                                                                        |  |
| **By signing this order form, you acknowledge that you have proof read all ordering information and want to process the order. |  |
| * Please keep a copy of this order form for your records.                                                                      |  |

**CONTACT INFORMATION**

|                   |
|-------------------|
| Name:             |
| Ship to Address:  |
| Telephone Number: |
| E-mail:           |