

BELLE UNIFORMS
266 Main Street
Paterson, New Jersey 07505
(973) 977-9733 Fax (973) 684-5266

ORDER FORM 2009

BERGEN COMMUNITY NURSING PROGRAM

Mr. Mrs.
 FULL NAME: Ms. Miss: _____ PHONE #: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____ APT# _____

PANTSUIT w/emblem	sz _____ () @ \$51.00	\$ _____
NAME PIN	sz _____ () @ \$ 5.00 ea.	\$ _____
BANDAGE SCISSORS	() @ \$ 4.00 ea.	\$ _____
WARM-UP JACKET w/emblem	sz _____ () @ \$22.00 ea.	\$ _____
MENS TUNIC w/emblem	sz _____ () @ \$25.00 ea.	\$ _____
MENS SLAX	sz _____ () @ \$20.00 ea.	\$ _____
MENS WARMUP JACKET	sz _____ () @ \$26.00 ea.	\$ _____

* **MINIMUM 2 GARMENTS IN ANY COMBINATION** *
 WARM-UP JACKET OPTIONAL

OTHER ITEMS AVAILABLE

SHOES	style _____ sz _____	() @ \$ _____ ea.	\$ _____
STETHOSCOPE KIT	color _____	() @ \$25.00 ea.	\$ _____
WATCHES		() @ \$ _____ ea.	\$ _____

CASH * MONEY ORDER * CREDIT CARD	Shipping Charge	\$ <u>6.00</u>
* PAYMENT AT TIME OF FITTING *	TOTAL	\$ _____
	AMOUNT PAID	\$ _____
	BALANCE	\$ _____

FITTING HOURS: Monday thru Saturday 10:00a.m. to 5:00p.m. NO APPOINTMENT NEEDED

PANTSUIT: tunic size _____ alter tunic _____ slax size _____ alter slax _____
