

ORDER FORM

2011 TMEA ALL-STATE MERCHANDISE

SHIP THIS ORDER TO:

Please fill out this form and mail it with the total payment indicated to:
 Southwest Emblem Co.
 P.O. Box 350
 Cisco, TX 76437

Name: _____
 Address: _____

 City/ST/ZIP: _____
 Phone #: _____

or you can order from our website
www.southwestemblem.com

Telephone #: 888-442-2514 • FAX #: 254-442-2514 • Website: www.southwestemblem.com

TMEA LARGE ALL-STATE PATCHES, 8" DIAMETER

Quantity	Item	Price Ea.	Extension
	TMEA ALL-STATE BAND (08, 09, 10 OR 11)	\$14.00	
	TMEA ALL-STATE CHOIR (08, 09, 10 OR 11)	\$14.00	
	TMEA ALL-STATE ORCHESTRA (08, 09, 10 OR 11)	\$14.00	
	TMEA ALL-STATE JAZZ ENSEMBLE (08, 09, 10 OR 11)	\$14.00	

TMEA All-State Pin

Quantity	Item	Price Ea.	Extension
	TMEA ALL-STATE PIN Please indicate year if other than current year: _____	\$4.25	

Bumper Stickers

Quantity	Item	Price Ea.	Extension
	ALL STATE DECALS	\$ 2.00	
	INSTRUMENT/LUGGAGE CASE STICKER – RED/WHITE/BLUE/GOLD	\$1.50	
	LARGE BUMPER STICKERS – TMEA ALL-STATE MUSICIAN	\$2.00	

All-State Buttons

Quantity	Item	Price Ea.	Extension
	"I'M AN ALL-STATE BROTHER" BUTTON	\$1.50	
	"I'M AN ALL-STATE DAD" BUTTON	\$1.50	
	"I'M AN ALL-STATE GRANDPARENT" BUTTON	\$1.50	
	"I'M AN ALL-STATE MOM" BUTTON	\$1.50	
	"I'M AN ALL-STATE SISTER" BUTTON	\$1.50	

TMEA HONOR / INVITED PATCHES

Quantity	Item	Price Ea.	Extension
	TMEA HONOR BAND PATCH	\$ 6.00	
	TMEA HONOR ORCHESTRA PATCH	\$ 6.00	
	TMEA INVITED CHOIR PATCH	\$ 6.00	
SHIPPING – HANDLING – INSURANCE CHARGES		SUBTOTAL	
UP TO \$25.00	\$ 5.00	\$300.01 - \$400.00	\$20.00
\$25.01 - \$100.00	\$10.00	\$400.01 - \$600.00	\$30.00
\$100.01 - \$300.00	\$15.00	OVER \$600.00	\$35.00
		SALES TAX (8.25%)	
		SHIPPING CHARGES (see left)	
		GRAND TOTAL ENCLOSED	

Please **double check** your order for accuracy and price calculation, and mail with **payment enclosed**. THANKS!

A money order or cashier's check may expedite shipping.
We appreciate your business!

CREDIT CARD INFORMATION

Name on card: _____	(circle one) VISA MC AMEX Discover
Billing Address: _____	Phone #: _____
City, ST, ZIP: _____	Email Address: _____
Card #: _____	Expiration Date: ____ / ____