



ACTION ART BANNERS

CHANGE ORDER FORM

**THIS FORM MUST BE FAXED IN.
NO PHONE OR EMAIL CHANGES WILL BE DONE.**

FAX#909-930-6555 (fax is on 24-7)

NAME _____ PHONE# _____

TEAM NAME _____

LEAGUE NAME _____

ORDER DATE _____

SHIPPING INFO / UPS _____ BULK _____ (check one)

******PLEASE PRINT IN CAPITAL LETTERS******

CODE	TYPE	DESCRIPTION

**CODE- C=CHANGE / D=DELETE / A=ADD
TYPE- P=PLAYER / TM=TEAM MOM / CH=COACH /
M=MANAGER / SP=SPONSOR**

**FOR ASST.'S ADD ASST. BEFORE TYPE.
EXAMPLE: ASST. TM FOR ASST. TEAM MOM.**

*WE WILL MAKE EVERY EFFORT TO MAKE YOUR CHANGE REQUEST
BUT THERE ARE NO **GUARANTEES**.
PLEASE SEE OUR TERMS AND CONDITIONS 15.0-15.4
FOR CHANGE AND ADD-ON TERMS.*