



BONE TO BROTH

# Subscription Form

1 <sup>st</sup> Tuesday of every month <b>Calgary NW</b> <input type="checkbox"/>	1 <sup>st</sup> Wednesday of every month <b>Calgary SE</b> <input type="checkbox"/>
1 <sup>st</sup> Tuesday of every month <b>Calgary NE</b> <input type="checkbox"/>	1 <sup>st</sup> Thursday of every month <b>Okotoks</b> <input type="checkbox"/>
1 <sup>st</sup> Wednesday of every month <b>Calgary SW</b> <input type="checkbox"/>	(we do not deliver to box numbers) <b>Other</b> <input type="checkbox"/>

### Customer Information:





Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### How often do you drink bone broth?

### Custom Order

			
<b>1-2 days per week</b> (1-2 cups per day)	<b>3-4 days per week</b> (1-2 cups per day)	<b>5-7 days per week</b> (1-2 cups per day)	<b>5-7 days per week</b> (<1-2 cups per day)
<b>1-7 Containers every month</b>	<b>8-11 Containers every month</b>	<b>12+ Containers every month</b>	<b>___ Containers every month</b>
\$15.00 x ___ = \$___/Month <input type="checkbox"/> Chicken _____ Beef _____	\$14.00 x ___ = \$___/Month <input type="checkbox"/> Chicken _____ Beef _____	\$13.00 x ___ = \$___/Month <input type="checkbox"/> Chicken _____ Beef _____	\$___ x ___ = ___/Month <input type="checkbox"/> Chicken _____ Beef _____

### Credit Card Authorization Form

### Add-ons

Please complete all fields. You may cancel this authorization at any time by contacting us. This authorization will remain effective until cancelled.

<b><u>Credit Card Information:</u></b>
Card Type: <input type="checkbox"/> MasterCard <input type="checkbox"/> Visa <input type="checkbox"/> Other
<b><u>Cardholder Name (As Shown on card):</u></b>
<b><u>Card Number:</u></b>
<b><u>Expiration Date (MM/YY):</u></b>
<b><u>Cardholder Billing Address (if not same as above):</u></b>

Products	QTY	Price
Beef Bouillon		\$25.00
Chicken Bouillon		\$25.00
Smoothie pops		\$4.00
Chicken Gravy Pouch		\$5.00
Beef Gravy Pouch		\$5.00
Bone Broth Seasoning		\$15.00

I, \_\_\_\_\_, authorize \_\_\_\_\_ to charge my credit card above, for the agreed upon purchases. I understand that my information will be saved to file for future transactions on my account.

\_\_\_\_\_  
Customer Signature

\_\_\_\_\_  
Date