

CAP ORDER FORM

CUSTOMER INFORMATION



NAME: _____ EMAIL/PHONE: _____

ORDER _____

DUE _____

DATE: _____

DATE: _____

(212) 267-7070

nycsewing@aol.com

109 Lafayette St #302, New York, NY 10013

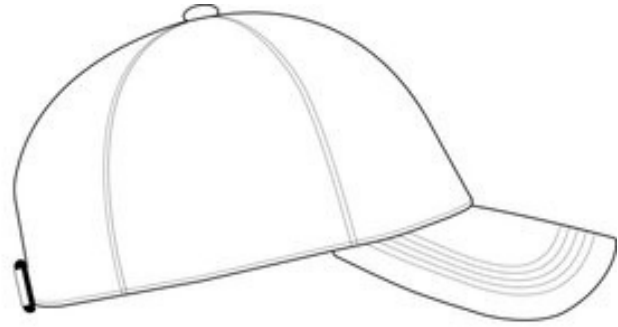
Qty: _____

Color: _____

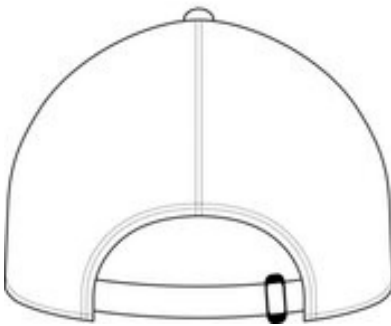
***Nothing on the Brim of the Cap**



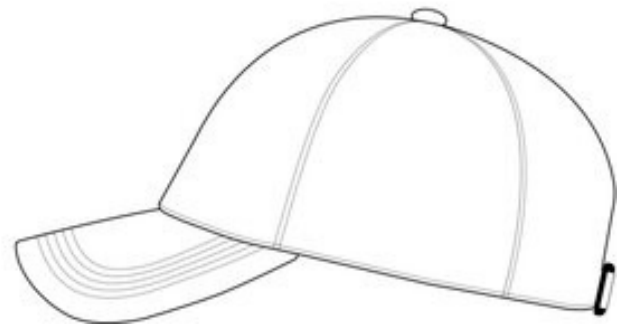
Front



Right



Back



Left

Embroider

Location: _____

Color: _____

Font: _____

Text: _____

Location: _____

Color: _____

Font: _____

Text: _____

Location: _____

Color: _____

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Text: _____

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Special Notes:
