
CUSTOM LATEX BALLOON ORDER FORM

BUSINESS NAME:

ORDERED BY:

SHIP TO STREET ADDRESS:

DATE:

CITY/STATE/ZIP:

DATE BALLOONS NEEDED BY:

ORDERS TAKE 7-10 WORKING DAYS WITH NO RUSH FEES

SIGNATURE

PHONE NUMBER

FAX NUMBER

EMAIL ADDRESS:

IF REPEAT ARTWORK: DATE OF LAST ORDER _____ & SALES NUMBER _____

Quantity

Balloon Size

Balloon Shade

Circle One: Standard / Crystal / Decorator / Pearalized / Metallic

Balloon Color(s)

Ink Color(s)

Sides

Circle One: 1 sided / 2 sided

If 2 sided, circle one: same art / different art

Font:

Wording (straight line
copy to be typeset)
Layout just as you
would like it to appear
on your balloons

Note: The layout you choose greatly affects the size of your imprint. Templates are online to help with layout. Proofs are also available to confirm layout before printing.

- Artwork is not straight-line copy to be set up. The camera ready is being emailed.

MAIL ARTWORK TO: sales@brandtheworld.com

Other fees: check all applicable services requested

- Request virtual proof for \$10.00 (to be added to order total emailed to address above)
- \$35.00 rush fee. I approve a \$35.00 rush charge to complete my order within 1-2 business days. I understand that air freight will also be added to my order and shipped via air freight to meet in hands date stated above. Standard orders will arrive in approximately 2 weeks.

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CUSTOMER NAME: _____

ACCESSORIES FOR CUSTOM BALLOONS (see website for details)

- EZ Safe Balloon Closures 0SAFE -QTY _____
- Balloon Cups 0CUP and Balloon Sticks 0STK -QTY _____
- EZ Ties w/ ribbon 0EZ -QTY _____
- Quickie Clips QC1 -QTY _____
- Foil Balloon Weights 0WT -QTY _____
- Heavy Balloon Weights SWT -QTY _____
- Standard Curling Ribbon 0RIB -QTY _____ Color _____
- White Cut Ribbon 0CURI -QTY _____
- Cut String -QTY _____
- Medium Weight Nylon Cord -QTY _____
- Hand Inflator INF -QTY _____
- Air Inflator AIR-E -QTY _____
- Plastic Jar w/ lid -QTY _____

Payment is required to begin production.

Payment information : MC / AMEX / VISA

CreditCard# _____ Exp.Date: _____

sec code: _____ (Amex- 4 digits on front; MC/visa-3 digits on back)

Authorizing Signature: _____

Name on Card: _____

Address on statement: _____

City: _____ State: _____ Zip: _____

In office Use only;
SR _____
E _____
PO _____
FAX _____
ART _____