

For This Purpose: ORDER FORM

Please fill out and mail to 484 Hampton Lane, Apt 1A, Walker, MI 49534
Email gycresources@gmail.com with any questions.

First name: _____ Last name: _____

Address: _____

City: _____ State: _____ Zip code: _____

Email address: _____ Phone: (____) _____

Number of books: _____

My donation (minimum \$19.99 per book) = \$ _____

Shipping (\$5 minimum or 15%): \$ _____

TOTAL: \$ _____

Payment method:

- Check (make payable to GYC and mail to 484 Hampton Lane, Apt 1A, Walker, MI 49534)
- Credit Card

CREDIT CARD PAYMENT

Cardholder's name (as it appears on the card): _____

Billing Address (same as above) : _____

City: _____ State: _____ Zip code: _____

Phone: (____) _____

Card type:

- Visa
- MasterCard
- Discover

Credit card number: _____

Security code: _____

Expiration date (month/year): ____ / ____

X _____
Signature