

## **Gold Star Home Delivery Form**

*Name			
*City		*State	*Zip
Ema	il Address		_
	ne Phone juired Information to	*Daytime/Cell Ph receive service.	one
_		rill receive a monthly statemer harges once per month or to p	
		ement. I understand that if my account is not be used to make payment	paid within 30 days after the
30 da		mation must be on file to cover dated. Signature and Credit of ice to be activated.	•
Credit	Card		Expiration Date
charg my u servi	ge my credit or bank de se of cleaning, alteration ces as necessary.	form, I hereby authorize Fab ebit card (VISA, M/C only) all ons, and leather cleaning up	charges resulting from
Signatu	re		

## **FURTHER INSTRUCTIONS**

Please return this form with your first order of dry cleaning. Please make sure that the bag you use is securely tied or sealed. We will then set up your account, process your first order and returned in a distinctive, personally tagged cloth laundry bag with an identification tag for your use.

Please feel free to give us a call at **224-3212**, for any additional questions you may have about the cleaning of your garments, service days, pickup/delivery times, prices or billing, please feel free to give us a call at **224-3212**.