

Jet Stik Order Form:

Name: _____ Date: _____

Billing Address:

Shipping Address:

Phone #: _____

Fax #: _____

Item	Qty	Amount	Total
<input type="checkbox"/> Jetstik Complete Kit	_____	\$1,795.00	_____
<input type="checkbox"/> Jetstik L Complete Kit	_____	\$1,895.00	_____
<input type="checkbox"/> Oxygen Regulator	_____	\$50.00	_____
<input type="checkbox"/> Shipping via UPS	_____	TBD	_____
Grand Total			_____

Method of Payment:

- CASH Check #: _____
 MC VISA Discover

How did you hear about the Jet Stik?

Card #: _____

CCV Code #: _____ Exp. Date: ____/____

Billing Address for the above card:

Sold By:
Windy Ridge Corporation
190 Ossipee Mountain Highway
Tamworth, NH 03886
1-800-639-2021
(603) 323-2322 FAX

Order #: _____