

ORDER FORM			DATE				
FULL NAME							
PHYSICAL ADDRESS							
EL/CELL No.		EMAIL					
DESCRIPTION AND/OR SPECIAL REQUIREMENTS	QTY	SIZE	DESCR	IPTION		COLOUR	
DELIVERY HOW DID YOU H		YES		NO	Referral	Leaflet	
SIGNATURE							

We require full payment with orders. Email a signed copy of this order form, and confirmation of payment details to ordersdab@gmail.com.

Please allow 6 to 8 weeks for delivery (excl public holidays) as all goods are made to order. All prices exclude delivery unless otherwise specified.

Payments to be made out to J Anderssen. Banking details are as follows:

ABSA Bank

Branch Code: 632 005 - Account No: 3800 456 1501 Account Holder: J Anderssen

Submission of this order form confirms your acceptance of our terms and conditions as laid out in detail on www.Design-A-Bed.co.za.