



4 Easy Ways to Order - Phone: (800) 352-6162 - Fax: (914) 934-5992 - Email: support@graduationsource.com - Web: www.GraduationSource.com

ALL NEW & RETURNING CLIENTS MUST COMPLETE THIS FORM PRIOR TO PLACING AN ORDER. ONCE COMPLETED THIS FORM MAY BE EMAILED OR FAXED ALONG WITH YOUR ORDER. KEEPING YOUR ACCOUNT UP-TO-DATE HELPS US TO PROVIDE THE BEST SERVICE POSSIBLE. **THANK YOU FOR YOUR BUSINESS!**

**ACCOUNT STATUS**  New Customer  Returning Customer

**TODAY'S DATE**

### PRIMARY CONTACT INFORMATION

Full Name

First  Last

Job Title

Phone  Fax

Email

Role in Graduation  Work at the school  Sell to the school  
*(Select One)*  Attend the school  Parent of a student  
 No school affiliation

### GRADUATION TYPE

College / University  
 Technical / Vocational  
 High School  
 Middle School / Junior High  
 Elementary School  
 Early Childhood *(Kinder, Pre-K, Etc)*  
 Homeschool  
 House of Worship  
 Other

### BILLING INFORMATION

A/P Contact

Organization

Billing Addr. 1

Billing Addr. 2

Billing City  State  Zip

Bill Phone  Fax

Billing Email

### ORGANIZATION TYPE

Private School  
 Public School  
 Religious School  
 Individual  
 Business  
 Other

### SHIPPING INFORMATION Check box if same as billing

Ship Attn. To:

Organization

Shipping Addr. 1

Shipping Addr. 2

Shipping City  State  Zip

Shipping Phone  Fax

Shipping Email

### TAX INFORMATION

Tax Registration Number

Exemption Status  
 Exempt  Non-Exempt

*If your organization is exempt, a copy of exemption certificate must be attached with account creation form. Failure to do so will result in tax charges.*

### ANNUAL GRADUATION INFORMATION

# of Graduates	# of Ceremonies	Graduation Month(s)	
<input type="checkbox"/> 1	<input type="checkbox"/> 1	<input type="checkbox"/> January	<input type="checkbox"/> September
<input type="checkbox"/> 2-9	<input type="checkbox"/> 2	<input type="checkbox"/> February	<input type="checkbox"/> October
<input type="checkbox"/> 10-24	<input type="checkbox"/> 3	<input type="checkbox"/> March	<input type="checkbox"/> November
<input type="checkbox"/> 25-49	<input type="checkbox"/> 4	<input type="checkbox"/> April	<input type="checkbox"/> December
<input type="checkbox"/> 50-99	<input type="checkbox"/> 5+	<input type="checkbox"/> May	<input type="checkbox"/> Every Month
<input type="checkbox"/> 100-249		<input type="checkbox"/> June	<input type="checkbox"/> Every 3 Months
<input type="checkbox"/> 250-499		<input type="checkbox"/> July	<input type="checkbox"/> Every Other Year
<input type="checkbox"/> 500+		<input type="checkbox"/> August	<input type="checkbox"/> One Time Event

### HOW YOU HEARD ABOUT US?

Email  Twitter  
 Flyer  Yahoo  
 Phone  Google  
 Mail  Facebook  
 Referral  Other

### MARKETING PREFERENCES

**I DO NOT** want to receive the following type of sales and marketing communications:

Email  
 Flyer  
 Phone  
 Mail  
 All of the Above\*

\*Transactional message types will still be sent



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BOTH NEW & RETURNING CUSTOMERS MUST SUBMIT AN ACCOUNT SET-UP FORM ALONG WITH THEIR ORDER. THE ACCOUNT # FIELD BELOW MAY BE LEFT BLANK BY NEW CUSTOMERS ONLY. RETURNING CUSTOMERS ARE URGED TO ENTER THEIR ACCOUNT # TO PREVENT PROCESSING ERRORS. IF ANY INFORMATION IS MISSING ON THE FORM BELOW YOUR ORDER MAY BE DELAYED OR FAIL TO BE PROCESSED. ONCE YOUR COMPLETED ACCOUNT & ORDER FORMS ARE RECEIVED YOU WILL BE SENT AN ORDER CONFIRMATION VIA FAX OR EMAIL WITHIN 48 HOURS. PLEASE REACH OUT TO US IF YOU HAVEN'T RECEIVED AN ORDER CONFIRMATION IN A TIMELY FASHION. **THANK YOU FOR ORDERING WITH US! WE LOOK FORWARD TO SERVING YOU!**

**ORGANIZATION NAME**

**ACCOUNT #**  **ORDER DATE**  **YOUR REF/PO #**

**TIMING IS EVERYTHING: PAYMENT DATE + PROCESSING TIME + SHIPPING METHOD = NEED BY DATE**

**SELECT PROCESSING TIME**

Standard  
10 Day

Rush  
5 Day

Hot  
2 Day

Red Hot  
1 Day

\*Ground Shipping Available with Standard Processing Only

**SELECT SHIPPING METHOD**

Ground Est. 2-5 Days

Two-Day 2 Days by 3 PM

Standard Overnight 1 Day by 3 PM

Priority Overnight 1 Day by 10:30 AM

First Overnight 1 Day by 8:30 AM

Intl. Economy Est. 2-5 Days

**ENTER IMPORTANT DATES**

Need by Date

Graduation Date

**SELECT YOUR GOWN PACKAGE**

**PACKAGE TYPE**

Cap Only

Gown Only

Cap & Tassel

Cap, Gown, & Tassel

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**FABRIC TYPE**

Shiny

Matte

Recycled (Black Only)

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**TASSEL COLOR(S)**

Color 1

Color 2

Color 3  Red/White/Royal (Only)

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**SIGNET YEAR**

2021

2022

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**FABRIC COLOR**

Black  Maroon

Pink  Emerald

Navy  Forest

Purple  Gold

Royal  Orange

Red  White

Sky  Silver

Brown  Burgundy

**ENTER GOWN SET DETAILS**

**ORDER STANDARD GOWN SIZES BELOW**

Sizes 21-36 = Child      Sizes 39-63 = Adult

Size	Height Range	Max. Weight	Quantity
21	2'6" - 2'9"	70 LBS	<input type="text"/>
24	2'10" - 3'1"	70 LBS	<input type="text"/>
27	3'2" - 3'5"	100 LBS	<input type="text"/>
30	3'6" - 3'9"	100 LBS	<input type="text"/>
33	3'10" - 4'1"	100 LBS	<input type="text"/>
36	4'2" - 4'5"	130 LBS	<input type="text"/>
39	4'6" - 4'8"	180 LBS	<input type="text"/>
42	4'9" - 4'11"	180 LBS	<input type="text"/>
45	5'0" - 5'2"	180 LBS	<input type="text"/>
48	5'3" - 5'5"	180 LBS	<input type="text"/>
51	5'6" - 5'8"	270 LBS	<input type="text"/>
54	5'9" - 5'11"	270 LBS	<input type="text"/>
57	6'0" - 6'2"	270 LBS	<input type="text"/>
60	6'3" - 6'5"	330 LBS	<input type="text"/>
63	6'6" - 6'8"	330 LBS	<input type="text"/>

Total Standard Quantity:

**ENTER CAP DETAILS**

\*FOR CAP OR CAP & TASSEL ORDERS ONLY

Size	Quantity
Toddler/Child	<input type="text"/>
Teen/Adult	<input type="text"/>
<b>Total Caps:</b>	<input type="text"/>

**ENTER FF GOWN DETAILS**

**ORDER FULL-FIT GOWN SIZES BELOW**

FULL-FIT GOWNS ARE ONLY AVAILABLE IN THE SIZES LISTED BELOW

Size	Min. Weight	Quantity
45	180 LBS	<input type="text"/>
48	180 LBS	<input type="text"/>
51	270 LBS	<input type="text"/>
54	270 LBS	<input type="text"/>
57	270 LBS	<input type="text"/>
60	X	X
63	330 LBS	<input type="text"/>

Total Full-Fit:

**PAYMENT INFORMATION** NO ORDER WILL SHIP WITHOUT PRE-PAYMENT (Purchase Orders Accepted from Public Schools for Orders Over \$500)

**SELECT YOUR PAYMENT METHOD**

Credit Card     Purchase Order     Wire Transfer

Mail Check     Fax Check     Money Order

**PAYMENT DETAIL**

Check Date

Check #

**PRICING DETAIL**

Estimate #  Savings Code

Salesperson

**CREDIT CARD INFORMATION**

American Express     Visa

Discover Card     Mastercard

Your card will be authorized at time of order placement and charged upon shipment\*

Credit Card #

Expiration Date  CVV Code  Billing Zip

Signature