Lakeshore

SUBMIT FORM

For Office Use Only:

Order Taken By:

Order Picked By:

Date Order Picked:

Phone: 306.477.0713 Fax: 306.477.0795
Email: gardencentre@lshore.com
Website: www.lakeshoregardencentre.com

Customer Name:	Order Date:
Street/PO Box: City: Postal Code:	Pick Up ☐ Delivery ☐ Preferred Pick Up Date:
Phone #	***When placing an order, please allow 48 hours for us to process your order.***
Email Address:	Delivery Address:
Credit Card #	
Expiry Date: CVC:	Are you a Garden Club member? Yes ☐ No ☐ Garden Club #

ITEM #	ITEM DESCRIPTION	COLOR	QTY	PRICE	TOTAL
CLUB	*Lakeshore Garden Club Card (optional)*	*N/A*	*1*	*25.00*	
					0
					0
					0
					0
					0
					0
					0
					0
					0
					0
					0
					0
					0
	Total will be calculated once order is finalized				0

Additional Inquiries: Is there something you want to order but can't find it on our website? Tell us about it here:

We will let you know by email/phone when your order is ready for curb-side pick-up and provide pick-up time options.

SUBTOTAL	**0**
Less 10% Club Member Discount	( )
GST (5%)	
PST (6%)	
TOTAL DUE	

ITEM #	ITEM DESCRIPTION	COLOR	QTY	PRICE	TOTAL
					0
					0
					0
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