

Use this form if you cannot use the generated web form.

# MANUAL ORDER FORM

Form MANv212

Item #	Item Description	Qty	Price	Total
			\$	+\$
			\$	+\$
			\$	+\$
			\$	+\$
			\$	+\$
			\$	+\$
~	If ordering models and item substitutions are NOT OK, enter 'N' in 'Qty' column → ~~Some items may be subject to being sold out~~			
<b>SUB-TOTAL</b>	<b>Sub-total before discountes</b>			= \$
<b>DISCOUNTS</b>	Members receive 10% discount on all items unless already discounted on Sentinel Sale or otherwise specifically designated. Enter membership number in block below.			-\$
<b>SUB-TOTAL</b>	<b>Sub-total before shipping &amp; handling and any sales tax</b>			= \$
<b>TAX</b>	<b>6% Sales Tax for Maryland Delivery only</b>			+\$
<b>S&amp;H</b>	<b>Domestic: \$7.00 for the first item EXCEPT \$3.50 for the first item</b> IF all items are any combination of items costing no more than \$10.00 or Videos/CDs or Calendars or Sentinels. <b>\$2.00 for each additional item.</b>			Shipping Fee → +\$
	<b>International: Shipping will be calculated by Company Store per best USPS rate, plus \$3.00.</b>			
<b>Membership</b>	\$45 Regular/USA    \$57 Sustaining/USA    \$30 Student/USA \$57 Regular/NON-USA    \$73 Sustaining/NON-USA    \$40 Student/NON-USA	Printed only <input type="checkbox"/> Digital only <input type="checkbox"/>		+\$
<b>Dual Media</b>	Member choice at renewal to receive BOTH Sentinel hardcopy and electronic PDF			\$10.00 +\$
<b>General Fund</b>	Any amount is appreciated and is tax deductible. For undesignated use.			+\$
<b>Archives Fund</b>	Any amount is appreciated and is tax deductible. For Archives expenses.			+\$
<b>Building Fund</b>	Any amount is appreciated and is tax deductible. For the Eldersburg building.			+\$
<b>Registration</b>	Pay for Mini-convention registration. Include official registration form(s).			\$ +\$
<b>Other</b>	Pay for other BORHS functions. Include the official registration or payment form(s).			\$ +\$
<b>TOTAL</b>	<b>Total amount due. If payment by check or MO, make payable to BORHS.</b> <b>International order must be paid by MasterCard, VISA, or AmEx.</b>			= \$
<b>NOTICE:</b>	Sometime in the future we will begin correctly calculating Sales Tax on the Retail price of products.			

"Thank You" for using the BORHS Company Store, supporting the BORHS Archives

<b>SHIP TO</b>	Name: _____	(You may use a return address mailing label.)
	Street: _____	
	City: _____	
	State: _____ ZIP/Postal Code: _____ Country: _____	
<b>CONTACT INFO</b>	Email: _____	Membership number: _____
	Phone (Specify H/W/C): _____	

IS THIS AN ADDRESS CHANGE? Yes \_\_\_ No \_\_\_ IF 'Yes', IS IT PERMANENT? Yes \_\_\_ No \_\_\_

### CREDIT CARD PAYMENT

For MasterCard, VISA, or AmEx, please provide the information required below.

<b>CREDIT CARD NUMBER</b>	_____ Expiration: ____/____ (MM/YY)
	Security Code → [    ]
<b>CREDIT CARD SALES SIGN HERE</b>	Signature _____ Circle card type: [MasterCard/VISA/AmEx]

Send to: **BORHS Store**  
**P. O. Box 1608**  
**Sykesville, MD 21784**

Voice mail for inquiries/requests at 443-398-8166  
 Sales Questions: storemanager@borhs.org  
 Membership Questions: membershipchair@borhs.org