

SPECIAL APPAREL ORDER FORM

Collegiate Order No. _____

Collegiate Apparel.
Another quality product of Herff Jones, Inc.

Please print legibly

Customer No. _____

Customer No. _____

S **Boston Univ B&N 480**
Individual

O **660 Beacon St.**
Street Address

L **Boston** **MA 02215-2009**
City County State Zip

D **(617) 236-7401**
Office Phone Best Time To Call

T _____
Email address

S _____
Individual

H _____
Street Address

I _____
City State Zip

P _____
City State Zip

T _____
Daytime Phone Best Time To Call

O _____
Email address

SCHOOL AFFILIATION **BOSTON UNIVERSITY**

SCHOOL LOCATION - TOWN & STATE **BOSTON, MA**



Pricing below valid through June 30, 2010

Date needed _____
If request date is not possible: Proceed - ship when ready Call First
Please allow 4-6 weeks for manufacturing after the complete order is received in our Champaign Office.

DOCTORAL GOWN: **\$595.60**
139752
 Special Doctoral Regalia - Marshal Model for Boston University

DOCTORAL HOOD: **\$141.00**
032829
 Doctoral Hood -Black Base Standard with Degree Velvet
DEGREE: _____
VELVET/DEGREE/SUBJECT/COLOR: _____
SCHOOL: **BOSTON UNIVERSITY**

DOCTORAL CAP: **\$125.70**
112965/008854
 8 SIDED Black Velvet Tam w/Gold Bullion Tassel

ACCESSORIES:
GARMENT BAGS: E-Z Stor Garment Bag \$12.90
 Nylon Garment Bag \$29.90
 Carry-All Garment Bag \$102.00
HANGERS: Black Contoured Hanger \$3.10
 Black Conformer 1 1/2" deep hanger \$7.20

REMARKS & SPECIAL INSTRUCTIONS _____

MEASUREMENTS

(Please Give All Information Requested)

MALE FEMALE

1. Height with shoes - top of head to floor _____ feet _____ inches.
2. Chest size - without coat _____ inches.
3. Shirt sleeve measurement _____ inches.
(Measure from center-back of neck, over the top of the shoulder, and along the outer arm to the break at the back of the wrist.)
4. Cap size _____ inches.
5. Floor clearance desired _____ inches.
(We will provide a 8" clearance if you do not specify.)
6. Personalized initials (if desired; no extra charge) - specify: _____

COST SUMMARY OF ORDER

Gown \$ _____
Hood _____
Cap/Tam _____
Tassel _____
Other Items: _____
Cost of merchandise..... _____
SALES TAX - your local rate..... _____
SHIPPING & HANDLING \$ _____
 Ground Service (to U.S. 48) \$19.95
 2nd Day Air (to U.S. 48) \$30.00
 Next Day Air (to U.S. 48) \$55.00
(Call if outside U.S. 48)
TOTAL COST OF ORDER..... \$ _____
Less advance deposit enclosed _____
(Please enclose 1/2 deposit if not using a credit card - see below)
BALANCE DUE \$ _____

CREDIT CARD OR PURCHASE ORDER

VISA Mastercard Discover

Credit Card No. _____
Expiration Date _____
Name on Card _____
Name exactly as it appears on card
Purchase Order # _____
OFFICE USE ONLY: _____

FAX COMPLETED FORM TO 617-236-7418

To confirm your order, please contact our office at 617-236-7401

Sales Professional **PAUL SHEERIN**

No. **0658**

Customer's Signature _____

Date _____