

EVENT REQUEST FORM



Thank you for planning an event. Our marketing department asks that you please take a moment to fill out this form, so we can efficiently process your order and support your event. Please allow a minimum of 6-10 working days to process, ship and receive your order.

Return form to customerservice@chalicepress.com

Event Name:

Date of Event:

Date Books are Needed:

Author Attending Event:

Book Title/s and Quantity/ies:

Quantity	ISBN #	Title of Publication
	97808272-	
	97808272-	
	97808272-	

Purchase Order Number? (please attach copy)

Did you speak with a Chalice Press Employee? Who?

Ordering Customer Name:

Organization You are Ordering for:

Ship to Address:

Contact Name:

Contact Phone:

Contact Email Address:

Please send this form to kschaeffer@chalicepress.com for review and we will contact you to collect payment information.

		OFFICE USE		Approval/initials	
Customer Code:	Acct. No.:	Credit:	Pay Terms:	Discount:	Freight:
Are title in warehouse?					