

Sisterly Village

13506 Hickory Springs Lane • Pearland, TX 77584 • Phone 713-960-2090 • info@sisterlyvillage.com • www.sisterlyvillage.com

Sample Request Form

Dear Prospective Client:

Thank you for making the step to request a sample box to view the product. Please follow the instructions below to make your reservation.

Guidelines:

1. Fill out the sample reservation form below and email back to Sisterly Village at info@sisterlyvillage.com.
2. Sisterly Village will contact you to confirm your requested date to host a sample day. Upon confirmation, Sisterly Village will submit an invoice for the cost of shipping the samples (to and from the shipping address provided). The invoice is required to be paid within 2 business days of receiving it to reserve the date.
3. The client is to receive a sample box that includes garments across all sizes for the requested product the week of their event. If otherwise, Sisterly Village will notify the client and determine future plan.
4. Sisterly Village is expected to receive sample box, with all garments present and in good condition, within 3 business days of hosted sample day.
5. Please complete the credit card information on the form. Note your credit card information will remain on file and will not be used, but only in the following instances.
 - a. Sisterly Village does not receive sample box back within expected timeframe. The retail cost of the garments will be charged to the card.
 - b. Sisterly Village receives garments back within the timeline; however, some of the garments are destructed, damaged, or reflect noticeable wear and tear not previously there prior to shipping for client's event. The retail cost of the damaged garment(s) will be charged to the card.

SISTERLY VILLAGE HAS MANAGED TO NOT NEED TO ENFORCE ITS SAMPLE DAY POLICY, PLEASE DO NOT BE THE FIRST CLIENT FOR US TO DO SO.

THANK YOU FOR YOUR INTEREST IN SISTERLY VILLAGE!

Sample Reservation Form: Credit Card Format

Sisterly Village

Full Name: _____

Shipping Address: _____

City: _____ State: _____ Zip Code: _____

Phone: () _____ E-mail: _____

Requested Sample Day Date: _____

Credit Card Information

Name on Card: _____

Credit Card Number: _____

Expiration Date: _____ CVV: _____

Billing Address: _____

City: _____ State: _____ Zip Code: _____