



# MAIL/FAX FORM

**RANDESIGN**

Personalized  
"Special Delivery" T-Shirts

**Available in three colors**

White with Red Stamp  
Blue with Blue Stamp  
Pink with Red Stamp

PLEASE PRINT CLEARLY

|  |                                |                               |                               |
|--|--------------------------------|-------------------------------|-------------------------------|
| Name (as you would like it to appear)                          |                                |                               |                               |
| Date of Birth  |                                |                               |                               |
| City and State of Birth  |                                |                               |                               |
| Birth Weight   | Lbs.                           | Oz                            | **no fractions or half oz.    |
| Time of Birth  | AM                             | PM                            | **please circle one           |
| Color  | <input type="checkbox"/> White | <input type="checkbox"/> Blue | <input type="checkbox"/> Pink |
| **please check one   |                                |                               |                               |
| Please send me _____ "Personalized T-Shirt(s)" at \$12.75 each |                                |                               | \$                            |
| Ohio residents add 7.75 sales tax (\$.99 per item)             |                                |                               | \$                            |
| Shipping and handling  |                                |                               | <b>FREE!</b>                  |
| <b>TOTAL</b>   |                                |                               |                               |

**METHOD OF PAYMENT**

Check or money order     MasterCard     Visa

Account # \_\_\_\_\_ Exp. Date: \_\_\_\_\_

**NAME & ADDRESS OF CREDIT CARD HOLDER**

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip: \_\_\_\_\_

Signature \_\_\_\_\_ Phone: \_\_\_\_\_

**SHIP TO**

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip: \_\_\_\_\_

For additional orders, please attach a separate form. Please allow 3-4 weeks for delivery. Mail to:  
**RANDESIGN** PO Box 22441 | Beachwood, OH 44122-9681 **OR** Fax to: **1-216-378-9510**  
[www.personalbabyproducts.com](http://www.personalbabyproducts.com)