



Merchandise Order Form

Customer Name: _____

Address: _____

Phone: _____ Email: _____

Port Milford Hat
_____ QTY X \$16.00

Port Milford T-Shirt

Men's _____ QTY X \$20.00 **Size:** L XL
 Women's _____ QTY X \$20.00 **Size:** M L XL

Port Milford Pullover

Men's _____ QTY X \$35.00 **Size:** XL
 Women's _____ QTY X \$35.00 **Size:** L XL

Port Milford Cooler/Tote
_____ QTY X \$25.00

Port Milford Tote
_____ QTY X \$18.00

TOTAL: \$ _____

Checks- made payable to: Port Milford

I authorize Port Milford to charge my **AMEX** **VISA** **MC** **Discover for the above amount.**

Card Number

Exp

Code

Customer Signature

Date