# ORDER FORM

Your Name: _____

Address: _____

_____

City: _____ Prov. _____ Postal Code: _____

Home Tel: _____ Bus Tel: _____

**Payment Information**

- ❑ Order online at www.ncmc.ca. Click on Catalogue.
- ❑ Enclosed is a cheque or money order made out to Church of the Nazarene Canada. (Designate as **"Gift Catalogue"** on memo line)
  Mail to: Church of the Nazarene Canada
  20 Regan Road, Unit 9, Brampton, ON L7A 1C3
- ❑ Please bill my credit card
  - ❑ Visa ❑ MasterCard
  - Card # |_|_|_|_| |_|_|_|_| |_|_|_|_| |_|_|_|_|
  - Expiry: |_|_| |_|_|
  - Signature on card: _____
- ❑ Call 1-888-808-7490 to order

Gift Order

| Gift Item | Price | Quantity | Total |
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| **Total Order** | | | **$** |
| **If giving gifts in honour of family members or friends, please indicate number of gift cards required.** | | | |