



Order Form

Send this order form to AARC via fax or mail.
See instructions at the bottom of the page.

1. CUSTOMER SHIPPING ADDRESS

☐ Business

☐ Residence

AARC MEMBER NUMBER (if applicable)

Company/Institution

Name

Title

Address (STREET ADDRESS REQUIRED – NO P.O. BOXES)

City / State / Zip + 4

Daytime Telephone (Please include area code)

Fax Number (Please include area code)

E-mail Address (For order confirmation)

2. BILLING ADDRESS

(Complete only if different from Shipping Address)

ATTN:

Company/Institution

Name

Title

Address

City / State / Zip + 4

Daytime Telephone (Please include area code)

Fax Number (Please include area code)

E-mail Address (For order confirmation)

3. ORDER

| ITEM NUMBER | DESCRIPTION OF ITEM | QTY. | PRICE PER ITEM | TOTAL PRICE |
|----------------------|-----------------------------------|------|----------------|-------------|
| Day Trip A | Day Tripper Group Package | | \$625.00 | |
| Day Trip B | Student Day Tripper Group Package | | \$250.00 | |
| SUBTOTAL | | | | |
| SHIPPING & HANDLING* | | | | |
| Sales Tax** | | | | |
| TOTAL | | | | |

4. SHIPPING METHOD

☐ UPS GROUND

NOTE: Signature for package required.

5. PAYMENT

☐ CHECK OR MONEY ORDER
Make payable to AARC

☐ CREDIT CARD

Card Number ☐ Visa® ☐ MasterCard® ☐ American Express® Expiration Date

Signature

Please print name as it appears on credit card

* Estimate is \$10. If paying by check, please call Customer Service for an exact amount. (972) 243-2272

** Add Sales Tax of 8.25% if your order has a destination shipping address in the State of Texas. Tax applies to total including shipping/handling charges.

For Texas customers who are exempt from sales tax, include a copy of your exemption certificate.

6. PLEASE PRINT. THEN SEND:



FAX – CREDIT CARD ORDERS
972-484-2720



MAIL –
AARC ORDER DESK
9425 N. MacArthur Blvd. Ste.100
Irving, Texas 75063-4706