

Zohar Glassworks Order Form

Your Ordering Information

First Name: _____
Last Name: _____
Address: _____
City, State, Zip: _____
Country: _____
Email: _____
Phone: _____
FAX: _____

Product Information

Product Id	Name	Quantity	Price

Product Total: _____
Shipping: _____
Order Total: _____

(Optional) Gift Information

Zohar Glassworks will gladly ship gift items on your behalf including your personal message on the packing slip. No prices will be shown. Please indicate if you would prefer an occasion specific card to be included for \$5.

Please send
First Name: _____
Last Name: _____
Address: _____
City, State, Zip: _____
Country: _____
Your message: _____

Gift Card: _____
Occasion: _____
Additional Gift Address: _____

**You may mail your check along with a copy of your order to us at:
Zohar Glassworks, 605 Park Avenue, Medford, OR 97501**