



Les Jardins Osiris
 818 rue Monique
 St-Thomas de Joliette, Qc
 J0K 3L0
 Tél. 877 759-8621
 Fax. 450 759-6571

MAILING ADDRESS :

Name _____
 Address _____
 City _____
 Province _____ Postal Code _____
 Telephone () _____
 E-mail _____

Please note that we send mail order in fall only and that we ask for a minimum amount of 100,00 dollars for each order. All sale taxes are included in prices.

Quantity	Name of plant	Price	Total
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			

Method of payment Check <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/>		COST OF PLANTS	
		SHIPPING CHARGES (10%)	
Credit card number <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		TOTAL	
Expiration <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		Last 3 digits on back of card <input type="text"/> <input type="text"/> <input type="text"/>	
<i>After printing this order form, please complete and mail or fax with your payment.</i>			
Signature: _____			