



CareFlite's Company Store

INSERT ORDER DATE: / /

How many?	Item:	Cost/item:	Total:
	Navy blue 42" Totes umbrella with lifetime warranty	\$19.99	
	Stuffed Bear (circle color): Orange Blue	\$9.99	
	Gym Bag Embroidered with Bell 429 plus CareFlite & Bell Logos	\$34.99	
	Blue Coffee Mugs	\$5.25	
	Short Sleeve T Shirts: S M L XL 2XL 3XL - Orange, Blue, Gray or White (circle desired size and color)	\$14.99	
	DriFit Short Sleeve T Shirts: S M L XL 2XL 3XL – Blue, Gray, White, Orange (circle desired size and color)	\$19.99	
	Caps: Blue helicopter Orange helicopter Camo with Logo (circle desired)	\$14.99	
	Medical Bracelets : * Plain Diabetes On Blood Thinners (circle desired)	\$9.99	
	Logo Socks (blue with CareFlite orange heart)	\$9.99	
	Flash Drive *NEW ITEM*	\$9.99	
	Canvas Bag *NEW ITEM*	\$13.99	
	Orange Heart Badge Holders	\$1.99	
	Hanging Travel Kit	\$26.99	
	Mini Blue Sharpie	\$1.99	
	Plastic Tumbler w/Lid & Straw – Orange Blue Clear (circle desired color)	\$9.99	
	Pen Light	\$4.99	
	Hot or Cold Gel Packs (Can be frozen or heated in microwave)	\$4.99	
	Stuffed Helicopter	\$14.99	
	Stuffed Ambulance	\$14.99	
	Orange Carabiners (D – Rings)	\$1.99	
	Sun Glasses – Orange or Blue (Circle desired color)	\$4.99	
	Baby Onesies: Blue White Gray (circle desired color and size) Newborn 3 Month 6 Month 12 Month 18 Month	\$14.99	
	<b>← TOTALS →</b>	XXXXXXXXXX	\$
	<b>CareFlite Members Take 25% Off Total Above &amp; Insert Membership Number</b>	#	—
XXXXXXXXXX	<b>REVISED TOTAL:</b>	XXXXXXXXXX	\$
XXXXXXXXXX	Texas Residents Add 8.25% Sales Tax	XXXXXXXXXX	
XXXXXXXXXX	Shipping/Handling \$9 For all Orders Under \$50	XXXXXXXXXX	\$
XXXXXXXXXX	Over \$50 Free Shipping (\$50 Before Tax)	XXXXXXXXXX	
	<b>CareFlite is a 501 (c) 3 non-profit. We are raising funds for another helicopter. Help us buy our next helicopter by contributing to our Capital Campaign.</b>	<b>INSERT AMOUNT HERE →</b>	\$
XXXXXXXXXX	<b>FINAL TOTAL...PAY THIS AMOUNT</b>	XXXXXXXXXX	\$

3/18/12

NAME: \_\_\_\_\_ TELEPHONE # \_\_\_\_\_

SHIPPING ADDRESS: \_\_\_\_\_

CITY/STATE/ZIP CODE: \_\_\_\_\_

CREDIT CARD TYPE: \_\_\_\_\_ CARD # \_\_\_\_\_ Sec. Code: \_\_\_\_\_

EXPIRATION DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_ (MONTH/YR) SIGNATURE: \_\_\_\_\_

**FAX THIS FORM TO (972) 602-7182 OR EMAIL A COPY TO [DVICK@CAREFLITE.ORG](mailto:DVICK@CAREFLITE.ORG)**  
 IF PAYING BY CHECK, MAIL TO DANA VICK, CAREFLITE, 3110 S. GREAT SW PARKWAY, GRAND PRAIRIE, TX 75052