

Lakewood Studios Mail Order Form

Order on-line at: www.lakewoodstudios.com

Date: _____

Name: _____

Company: _____

Billing Address: _____

City: _____ State: _____

Country: _____ Zip: _____

Telephone: _____

E:mail: _____

Credit Card: American Express Discover Mastercard VISA

Cardholder: _____

Card Number: _____

Expiry Date: _____

Signature: _____

I wish to order: This is an educational order.

_____ licenses for _____ @ \$_____ U.S. per license = \$_____ Total Price
(Num) (Product) (Canadian Residents please add 5% GST.)

Serial Code: _____

Please mail the completed form to: **Lakewood Studios, 144 Colbeck Drive, Welland,
Ontario, Canada, L3C 7M1**