Business Card Order Form

(PLEASE PRINT)

Name ________________________________________________________________

Title Line __________________________________________________________________________

Optional Title Line #2 __________________________________________________________________________

Address on Card (choose one)

☐ Knight Campus
☐ Flanagan Campus
☐ Liston Campus
☐ Newport County Campus
☐ Quonset Point (129 Airport Street, North Kingstown, RI 02852)

Telephone Number(s) (Maximum of Two) __________________________________________

________________________________________

Fax Number __________________________________________________________________________

E-Mail Address ________________________________________________________________

How Quickly are Cards Needed? (choose one)

☐ Standard Processing (2-3 Week Processing)
☐ Rush Processing (7-10 Day Processing)

Note: Any changes in standard format must be approved by the Purchasing Office prior to placing order.

Signature __________________________________________________________________________