

FLOWERS DIRECT DELIVERY FORM

1

BOUQUET SELECTION

Please refer to our booklet and choose from one of our selected range of bouquets. Flowers and colours will vary due to seasonal flower supply and availability

PRODUCT REFERENCE CODE	VALUE
-----	\$
-----	\$
-----	\$
SELECT DELIVERY ZONE	SOUTH ISLAND <input type="checkbox"/> \$15.00
(Please tick)	NORTH ISLAND <input type="checkbox"/> \$25.00
-----	-----
TOTAL TO PAY (required upon booking)	\$

SPECIAL REQUIREMENTS FOR BOUQUET

2

DELIVERY INSTRUCTIONS

DELIVERY NAME: _____ PHONE: _____

ADDRESS FOR DELIVERY

Please note: We require one form to be completed for each delivery address. We are not able to deliver to rural delivery addresses

HOUSE # _____ STREET/ROAD: _____

SUBURB: _____ CITY: _____

POSTCODE: _____ DELIVERY DATE: _____

ANY SPECIAL DELIVERY INSTRUCTIONS:

3

MESSAGE FOR CARD

4

DELIVERY INSTRUCTIONS

We require your details in case we have any questions about your order

NAME: _____ SIGNATURE: _____

EMAIL: _____ PHONE: _____

STORE USE ONLY

STORE NAME: _____ PHONE: _____

STAFF MEMBER NAME: _____

Scan and email this Order Form to: flowers@moffatts.co.nz