



PURCHASE FORM

Fax completed purchase form to fax (403) 723.0117
Phone in purchase to (403) 723.0077 ext 111 or (888) 35.KAYAK
Email completed purchase form to sales@rethinkkayak.com

Name: _____

Mailing Address: _____

City : _____ Province / State: _____ PC / ZIP: _____

Email: _____ Telephone: _____

Order Date: _____

Shipping Address same as billing address or : _____

City : _____ Province / State: _____ PC / ZIP: _____

TRAK T-1600 Kayak

Style	Color	Retail	Discount Price	Quantity	Sub-Total
T-1600-G	Green / White	\$ 4,900			\$
T-1600-Y	Yellow / White	\$ 4,900			\$

Your TRAK kayak purchase includes:
Sprayskirt, TRAKSTER Pack, 2 float bags,
5 year warranty, 30 day money back guarantee

Sub-Total	\$
Tax GST 5%	\$

Order Total \$

Payment

Visa MasterCard ***Cheque (make payable to TRAK Kayaks Inc.)*** American Express

Expiry /

Cardholder's Name (as it appears on card): _____

Signature

Date

Upon receipt of your order, you will be issued a serial number and a delivery date.

Internal use Only			
Order Taken By: _____	Date: _____	Phone # _____	
Estimated Shipping Date: _____	Estimated Arrival Date: _____		