



Non-Profit Equestrian Sport Helmet Discount Program

DATE: _____
NAME: _____
ADDRESS: _____
CITY / STATE / ZIP: _____
PHONE: _____ 501(c)3 NON PROFIT #: _____

ALL ORDERS MUST BE ACCOMPANIED BY A CHECK, MONEY ORDER, VISA, MASTERCARD, OR AMERICAN EXPRESS INFORMATION

Helmets packed in polybags with display boxes and shipped via UPS to one location.
Minimum of 12 Helmets Per Order
Freight Additional

For a proper fit, carefully measure the circumference of the head 1" above the eyebrows.

Table with 7 columns: PART #, SIZE, MEASUREMENTS, COLOR, BULK 12+, QTY, TOTAL. Includes rows for sizes XSMALL, SMALL, MEDIUM, LARGE and summary rows for BULK 12+ FREIGHT and GRAND TOTAL.

PAYMENT INFORMATION: CHECK / MONEY ORDER (ENCLOSED) CHECK #: _____ AMT: _____
VISA / MC / AMEX #: _____ EXP: _____
CARDHOLDER SIGNATURE: _____

COMPLETE AND FAX THIS FORM TO 858-587-7733. OR, MAIL COMPLETED FORM WITH PAYMENT TO:

TROXEL, LLC
6222 FERRIS SQUARE
SAN DIEGO, CA 92121

QUESTIONS? 1-800-288-4280

NO PHONE ORDERS