

FAX ORDER FORM FAX: 45 776108



*please **phone** your store to confirm order has been received. store details found on website. Phone 4577 2244*

Name/Company: _____ Phone/Mobile: _____

Store: **WINDSOR** Pickup/Delivery Time: _____ AM / PM

*Delivery Address: _____ (*Check with store on delivery policy)

***Minimum \$300.00 order and 24 hours notice**

Fill in all details below for each person/order. Orders greater than 6 selections; print extra form/s and make note of total orders

Selection 1	Name	Noodle Meal	Extra's/No	Chilli Kick	Starters/Drinks	Subtotal
				<input type="checkbox"/> Med <input type="checkbox"/> Hot <input type="checkbox"/> XHot		\$

Selection 2	Name	Noodle Meal	Extra's/No	Chilli Kick	Starters/Drinks	Subtotal
				<input type="checkbox"/> Med <input type="checkbox"/> Hot <input type="checkbox"/> XHot		\$

Selection 3	Name	Noodle Meal	Extra's/No	Chilli Kick	Starters/Drinks	Subtotal
				<input type="checkbox"/> Med <input type="checkbox"/> Hot <input type="checkbox"/> XHot		\$

Selection 4	Name	Noodle Meal	Extra's/No	Chilli Kick	Starters/Drinks	Subtotal
				<input type="checkbox"/> Med <input type="checkbox"/> Hot <input type="checkbox"/> XHot		\$

Selection 5	Name	Noodle Meal	Extra's/No	Chilli Kick	Starters/Drinks	Subtotal
				<input type="checkbox"/> Med <input type="checkbox"/> Hot <input type="checkbox"/> XHot		\$

Selection 6	Name	Noodle Meal	Extra's/No	Chilli Kick	Starters/Drinks	Subtotal
				<input type="checkbox"/> Med <input type="checkbox"/> Hot <input type="checkbox"/> XHot		\$

RESTAURANT USE ONLY:
<input type="checkbox"/> Order Confirmed
Staff Member: _____

PAYMENT OPTION:	DELIVERY CHARGE: \$ TOTAL CHARGE: \$ <small>+ Amex@2% charge</small>
<input type="checkbox"/> Cash <input type="checkbox"/> Visa/Mastercard /Amex <input type="checkbox"/> Eftpos	