



BNI Chapter Order Form
Fax to: 914-793-3440
Please check all supplies before placing order

Order Date: _____

Prepared by: _____ **Position:** _____ **Chapter:** _____ **# of Members:** _____

Mail Order to: _____
 (Not a P.O. Box)

Please complete both columns when ordering. Allow at least one week for delivery.

Chapter Supplies

	<u>QUANTITY</u>	
	<u>On Hand</u>	<u>Ordering</u>
Referral Slips (recommended quantity 250)	_____	_____
Visitor Packets		
Visitor Envelopes (Max. 25)	_____	_____
Applications (Max. 25)	_____	_____
Renewal Applications (Max. 25)	_____	_____
Visitor Information Sheets (Max. 25)	_____	_____
New Article Reprints (Max. 25)	_____	_____
Tri-Fold Brochures (Max. 25)	_____	_____
Invitation Cards		
Post Cards (Max. 100)	_____	_____
Fold-over Cards (Max. 50)	_____	_____
Notable Networker Certificates (Max. 12)	_____	_____
Ribbons (NOTE: LT and Committee Ribbons can <u>ONLY</u> be requested 60 Days from the beginning of a NEW TERM!)		
Leadership Team	_____	_____
Visitor Host	_____	_____
Membership Committee	_____	_____
Educational Coordinator	_____	_____
Events Coordinator	_____	_____
Mentoring Coordinator	_____	_____
1 Year Member	_____	_____
2 Year Member	_____	_____
Member over 3 Years	_____	_____
Member over 5 Years	_____	_____
Member over 10 Years	_____	_____
Member over 15 Years	_____	_____
One-to-One Forms (Max. One Pad per Order)	_____	_____
Thank You for Closed Business Form (Max. One Pad)	_____	_____
BNI Stick on Name Badges (Max. 50)	_____	_____
Other: _____	_____	_____

Internal use only
Date Ordered: _____
Date Shipped: _____
Date delivered: _____