




# UGA Extension Business Card Order Form

1-18

BULLDOG PRINT + DESIGN


← **FRONTS**  
(choose one) →

**A**



County Office or Department  
Department or office  
First and Last Name  
Title  
Building, Suite # | Address | City, GA 30000  
TEL 706-542-0000 | FAX 706-583-0000  
email@uga.edu  
www.uga.edu

**B**



County Office or Department  
Department or office  
First and Last Name  
Title  
Building, Suite # | Address | City, GA 30000  
TEL 706-542-0000 | FAX 706-583-0000  
email@uga.edu  
www.uga.edu

**GEORGIA**  
4-H

The University of Georgia 4-H program is the largest youth leadership organization in the state.

**A**

↑ **BACKS**  
(choose one) ↓

**GEORGIA**  
4 - H FOUNDATION

The University of Georgia 4-H program is the largest youth leadership organization in the state.

**B**

## Digital (Flat Printing)

**Stock: Classic Crest Eggshell Avon Brilliant White**

- 250 cards in color.....\$20.00
- 500 cards in color.....\$35.00

\* Shipping charges will be additional for Off-campus deliveries.

## 1 Contact info (required)

\* The standard turnaround time for business cards is 4 working days from proof approval date.

Date:

|               |        |  |  |
|---------------|--------|--|--|
| Contact Name: | Dept:  |  |  |
| Phone:        | Fax:   |  |  |
| Account #:    | Email: |  |  |

## 2 Job specs (required)

|                    |                            |                            |
|--------------------|----------------------------|----------------------------|
| BC Layout (FRONT): | <input type="checkbox"/> A | <input type="checkbox"/> B |
| BC Layout (BACK):  | <input type="checkbox"/> A | <input type="checkbox"/> B |
| Quantity:          |                            |                            |

Some information on the business card template is optional.  
Leave fields blank if they do not apply.

## 3 Delivery address: (required)

☐ On-campus (building & room) ☐ Off-campus ☐ Pick-up @ Admin. Svcs. W.

\_\_\_\_\_

\_\_\_\_\_

Attention:

## 4 Order information:

|  |                              |        |         |
|--|------------------------------|--------|---------|
| ORDER  | County Office or Department: |        |         |
|  | Department or Office:        |        |         |
|  | Name:                        |        |         |
|  | Title:                       |        |         |
|  | Building, Suite #:           |        |         |
|  | Address:                     |        |         |
|  | City/State:                  |        |         |
|  | Zip code:                    |        |         |
|  | Telephone #:                 | Fax #: | Cell #: |
|  | E-mail:                      | Web:   |         |
| Other, alternative info, special instructions: |                              |        |         |

Admin. Svcs. Warehouse • 4435 Atlanta Highway • Athens, Georgia 30606 • Telephone 706.542.4440

Completed forms may be printed and faxed or mailed to the address above.

To send this form electronically it must be saved and manually attached to an email and sent to [printing@uga.edu](mailto:printing@uga.edu).