PLEASE PRINT AND INCLUDE WITH SHIPMENT

Hazel Creek Turkey Head Shipment Form

Taxidermist Name _____ Company Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Date _____

E-Mail _____

Payment – Please Check One

Deposit Paid _____ Check # _____ Date Paid _____

☐ Pre-pay ☐ Cashier's Check ☐ Check (Please allow 2 weeks from deposit)

☐ Credit Card ☐ Visa ☐ MasterCard ☐ Discover

Card No. _____

Expiration Date _____

Number of Turkey Heads to be freeze dried _____ Replacement Heads O.S. _____

Extra Heads for sale or credit _____

Turkey Heads to be painted?

☐ Painted ☐ Unpainted

Customer Name or Number, etc.	Head Pose	OPTIONAL Turn of Snood Left	Right	Skull Turn Left	Right	Customer Name or Number, etc.	Head Pose	OPTIONAL Turn of Snood Left	Right	Skull Turn Left	Right