

Spring Valley Floral

DECORATING COMPANY INC.
241 South Little Tor Road
New City, NY 10956

TEL: 845 268-7555 FAX: 845 268-6570
Web Site: www.springvalleyfloral.com
Email: maryann@springvalleyfloral.com

FLORAL DECORATIONS

NAME OF SHOW: _____

SHOW LOCATION: _____

DATES OF SHOW: _____

CUSTOM FLORAL SERVICES	Cost Each	Quan.	Total
Fresh Floral Arrangement 12 - 14" High	70.00		
Fresh Floral Arrangement 15 - 18" High	80.00		
Exotic Floral Arrangement 14" High	85.00		
Exotic Floral Arrangement 24" High	99.00		

ALL PRICES INCLUDE
INSTALLATION, SERVICING,
AND REMOVAL AT END OF
SHOW

SPECIAL SERVICES
AVAILABLE UPON REQUEST

- GARDEN AREAS
- FOUNTAINS
- HOSPITALITY SUITES
- LUNCHEONS
- BANQUETS

ON SITE ORDERS SUBJECT TO
AVAILABILITY

___ PLEASE HAVE YOUR
DESIGNER COME BY TO
MAKE SUGGESTIONS
DATE/TIME _____

ALL PLANTS INCLUDE
DECORATIVE CONTAINERS
PLEASE CHECK ONE
___ WHITE ___ BLACK

RENTAL GREEN & FLOWERING PLANTS	Cost Each	Quan.	Total
Mum Plants ___ yellow ___ white ___ lavender	30.00		
Azaleas	35.00		
Green Table Plant	30.00		
Large Fern	40.00		
3-foot Green Plant	47.00		
4-foot Green Plant	57.00		
5-foot Green Plant	67.00		
6-foot Green Plant	77.00		
8-foot Green Plant	93.00		

DELIVERY CHARGE: \$35.00

SUBTOTAL: _____

ADD 8.875% NEW YORK SALES TAX: _____

TOTAL: _____

PAYMENT POLICY: ALL ORDERS MUST BE PAID IN ADVANCE

Enclose your check or credit card information as indicated below. Make checks payable to: Spring Valley Floral.

Credit Account Number

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
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Expiration Date MM/YY

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American Express (15 Digits) Check

MasterCard (16 Digits) Visa (13 or 16 Digits)

Authorized Signature

Name on Card

Security Code

RETURN THIS ORDER WITH PAYMENT TO SPRING VALLEY FLORAL

Company _____ Phone _____

Address _____ FAX _____

City, Zip, State _____ E-mail _____

Party in Charge _____ Onsite Phone Number _____

Authorized Signature _____ **BOOTH #** _____