



Parts Order Form

Customer Info

From: _____ Contact Name: _____ Date: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Day Phone: _____ Night Phone: _____ Fax: _____
 Email Address: _____ Your Contact at Zipper's: _____

Shipping & Payment

Return Shipping Method: UPS Ground 3-Day 2-Day Overnight Other: _____
 Payment Method: COD Credit Card Visa Master Card Discover Other: _____
 Billing Name & Billing Address on Card: _____
 Credit Card #: _____ - _____ - _____ Exp: _____ / _____ CVN: _____
 Signature: _____

Motorcycle Information

Year: _____ Model: _____ Use: Cruising Touring Sport Racing
 Other Modifications: _____

Parts Order

Qty	Part Number	Description	Price Each

Notes

Notes / Special Instructions: _____

Submit

Fax your Zipper's Performance Products order to:
410-579-2836

Email your Zipper's Performance Products order to:
Zippers@ZippersPerformance.com