

Doyle Sails One Design
 96 Swampscott Road
 Salem, MA 01970
 Monday-Friday 9-5 ET
 Phone: 978-740-5950
 Fax: 978-740-5959
 onedesign@doylesails.com

2018 Wianno Order Form

I would like to receive my sails by (date): _____

BILL TO:	SHIP TO: (if different)
COMPANY:	COMPANY:
NAME:	NAME:
STREET 1:	STREET 1:
STREET 2:	STREET 2:
CITY: STATE: ZIP CODE:	CITY: STATE: ZIP CODE:
PHONE:	PHONE:
EMAIL:	
PAYMENT METHOD: _____ VISA _____ MC _____ DISC _____ CHECK CARD #: _____	
CCV: _____ EXPIRATION DATE: _____ / _____ SIGNATURE: _____ DATE: _____	

2018 WIANNO SAIL ORDER

Sail Number: _____ Number/Insignia/Trim Stripe Color: __Blue __Black __Red __Green

		TOTAL
<u>Main</u> <input type="checkbox"/> Class Main (\$3235)	<u>Main Option</u> <input type="checkbox"/> Trim stripe (\$15)	<input type="text"/>
<u>Jib</u> <input type="checkbox"/> Class Jib (\$1245)	<u>Jib Options</u> <input type="checkbox"/> Trim stripes (\$30) <input type="checkbox"/> Tell Tale window (\$30)	<input type="text"/> <input type="text"/>
<u>Spinnaker</u> <input type="checkbox"/> .75 oz. Nylon Spinnaker (\$1460)	<u>Spinnaker Options</u> <input type="checkbox"/> Hoop turtle bag (\$75) <input type="checkbox"/> Brummel hooks (\$30)	<input type="text"/> <input type="text"/>

Please Note: 50% of Order Total will be charged to your credit card when your order is processed. The remaining balance plus the cost of any additions and/or changes made to your order will be charged to your credit card prior to shipment.

Sub Total:	<input type="text"/>
6.25% Sales Tax (if received in MA):	<input type="text"/>
*Shipping:	<input type="text"/>
ORDER TOTAL:	<input type="text"/>
50% Deposit Due:	<input type="text"/>
Balance:	<input type="text"/>

Shipping: Doyle One Design uses UPS as a carrier within the continental United States. For international shipments please call for a Fed Ex Estimate. Prices listed are for UPS Ground, standard delivery. Express delivery will be an additional charge.

***UPS Ground**

Main: \$60
Jib: \$35



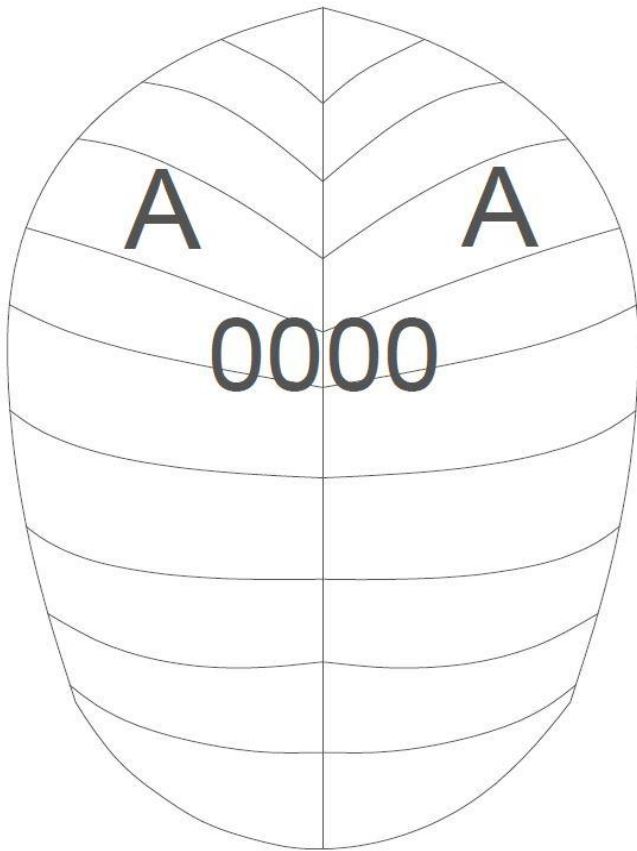
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Wianno Spinnaker Color Sheet

Customer Name: _____

Sail Number: _____

Please circle your preferences in each category:



Solid Sail color

Red	Blue	Green	Gold	Pink
	Black	White	Silver	

For custom coloring write the color names listed above in the color panels of your choice.

Optional Stripe Color (A)

Red	Blue	Green	Gold	Pink
	Black	White	Silver	

Number Color

Blue	Black	Red	Green
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