

To order, please print, fill out and email or fax to:

**Fischer's Meat Market**  
**P O Box 156**  
**304 N. Main Street**  
**Muenster, TX 76252**  
**Email: fischersmeatmarket@ntin.net**  
**Fax number: (940) 759-4240**

Contact information:

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City, State, Zip:** \_\_\_\_\_

**Phone number:** \_\_\_\_\_

**Cell Phone Number:** \_\_\_\_\_

Ship to address if different from above:

Name: \_\_\_\_\_

Business Name: (if applicable) \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Please check your choice date for arrival:

\_\_\_ Immediate Delivery \_\_\_ Thanksgiving \_\_\_ Christmas

\_\_\_ Other: Please specify \_\_\_\_\_

Method of Payment: Type of Card: \_\_\_\_\_

Name as it appears on card: \_\_\_\_\_

Account #    \_\_\_ \_\_\_ \_\_\_ -- \_\_\_ \_\_\_ \_\_\_ -- \_\_\_ \_\_\_ \_\_\_ -- \_\_\_ \_\_\_ \_\_\_

Expiration date: (month—year)   \_\_\_ \_\_\_ -- \_\_\_ \_\_\_

