



**Juliette Gordon Low  
Patch Order Form**

Name: \_\_\_\_\_ Service Unit: \_\_\_\_\_

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

City & Zip: \_\_\_\_\_ Phone (     ) \_\_\_\_\_

\_\_\_\_\_ Number of patches x \$1.50 = \$ \_\_\_\_\_

Tax (7.25%) = \$ \_\_\_\_\_

Amount enclosed = \$ \_\_\_\_\_

Credit Card (minimum order of \$10.00):  Visa     Mastercard

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Mo.      Yr.

Credit card # - Please Do Not leave space between numbers:

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Signature: \_\_\_\_\_

Mail order form, tracking and evaluation along with payment to:  
GSJTC Shop  
1831 Brundage Ln.  
Bakersfield, CA 93304

Questions – please contact Lynne Muñoz at 1-800-225-4475 or (661) 327-1409 ext. 235 or e-mail:  
[lmunoz@girlsfirst.org](mailto:lmunoz@girlsfirst.org).