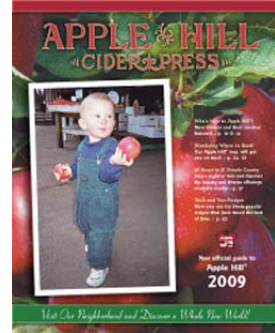




Apple Hill Cider Press Guide Order Form

Please print and mail
this order form
with your payment to:
Apple Hill Growers
P. O. Box 494
Camino, CA 95709



Quantity: _____

Cost: \$2.00 Each

Total Enclosed: \$ _____

Check #: _____

OR - Credit Card (VISA/MC – circle one):

Name as it appears on the card: _____

CC #: _____

Expiration Date: ____/____

Name: _____

Address Line #1: _____

Address Line #2: _____

City/Town, State: _____

Zip: _____

Phone: _____

For further information, call (530) 644-7692.