



Orchid Wiz Purchase Form

PLEASE PRINT!

Name: _____

Address: _____

City: _____

State: _____

Zip Code: _____

Phone: _____

Email: _____

Send a check made out to Maine Orchid Society for \$213 to:

Vicki Fisk
3 Chester St.
Portland, ME 04103

The above information is necessary for OrchidWiz to preregister the software to insure users get the proper updates.

When the order is completed, everyone will get their program and a refund check for any additional discounts we can get. MEOS is not keeping any of the additional money.