



Order Form

Starlight Designer
Drapery Collections

Please fax this order form to 905.479.4079 or email it to orders@starlightdrapery.com.

You will receive confirmation of your order within one day. Two week turnover on condition of fabric availability.

Starlight Drapery Workroom & Designer Resource Centre | 220 Royal Crest Court, Unit 5, Markham, ON L3R 9Y2

T 905.479.5545 F 905.479.4079 E info@starlightdrapery.com www.starlightdrapery.com

Name _____ Tag _____ Company _____ PO _____ Account # _____

PLEASE PICK ONE: For pick up at Starlight Drapery (220 Royal Crest Court, Unit 5, Markham ON) Ship to address on file Ship to other address

Address _____ Contact (Required) _____ Phone (Required) _____

Do you require check measure or installation services for any of the items on this order form? YES NO

Drapery Panels

Fabric ITEM No.	Lining Colour		Lining Upgrade	Style ITEM No.	Hanging Options		SIZE Width x Length	Decorative Trim ITEM No.	Quantity
	White	Ivory			Tabs	Hooks			
1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	W _____ x L _____		
2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	W _____ x L _____		
3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	W _____ x L _____		
4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	W _____ x L _____		

Hardware Packages

Hardware ITEM No.	FINISHES			Rod/Track LENGTH	Quantity
	Brushed Nickel	Satin Gold	Oil Rubbed Bronze		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Roman Shades

Fabric ITEM No.	Lining Colour		Lining Upgrade	Style ITEM No.	MOUNT		CONTROLS		SIZE Width x Length	Decorative Trim ITEM No.	Quantity
	White	Ivory			Inside	Outside	Left	Right			
1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	W _____ x L _____		
2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	W _____ x L _____		
3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	W _____ x L _____		
4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	W _____ x L _____		

Cushions

Fabric ITEM No.	CUSHION STYLE		SIZE Width x Length	Decorative Trim ITEM No.	Quantity
	Knife Edge	Self Piped			
	<input type="checkbox"/>	<input type="checkbox"/>	W _____ x L _____		
	<input type="checkbox"/>	<input type="checkbox"/>	W _____ x L _____		
	<input type="checkbox"/>	<input type="checkbox"/>	W _____ x L _____		
	<input type="checkbox"/>	<input type="checkbox"/>	W _____ x L _____		

Valances

Fabric ITEM No.	Lining Colour		Lining Upgrade	Style ITEM No.	MEASUREMENTS				Board Mount ITEM No.	Decorative Trim ITEM No.	Quantity
	White	Ivory			Face Width	Return Width	Finished Width	Length			
1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>								
2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>								
3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>								
4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>								

Fabric by the Yard

Fabric ITEM No.	Quantity (Yards)

Special instructions, questions, comments, concerns? Please let us know... _____

Signature _____

Date _____