

SOUTHWEST BUSINESS CARD REQUEST

ALL fields must be completed before the business card request form can be submitted to Creative and Printing Services. Incomplete forms will be returned to the client via campus mail.

Employee name _____

Department account number _____

Contact telephone number _____ Contact e-mail address _____

Requested quantity of business cards (check one): 100 250 500

Complete the ONE section below that meets your business card requirements.

I have a current Southwest business card and am requesting it to be reprinted without any changes.

**attach current
Southwest business card
here**

Attach your current Southwest business card to the spot provided to the left. The sample is REQUIRED in order to have your business cards reprinted. If you do not have any business cards remaining, please complete the section below.

I require a new business card or changes to my current business card.

Complete the following information EXACTLY as you wish for it to appear on your printed business card.

Employee name _____

Title _____

Department _____

Campus, center or site (address given will match that of the indicated campus, center or site; home addresses and alternate addresses are not permitted; office numbers are not permitted)

Macon Cove Campus

Millington Center

Maxine A. Smith Center

Union Avenue Campus

Gill Center

Fayette Site

Whitehaven Center

Telephone _____ Fax OR Southwest-issued cell phone _____

(Personal cell phone numbers are NOT permitted.)

Southwest e-mail address _____

(Personal e-mail addresses are NOT permitted.)

FINAL CLIENT APPROVAL

By signing this form, the client agrees that the attached document is approved for printing, and assumes all responsibility as to its accuracy.

Client signature and date - document will NOT be duplicated without signature