Signature Perfect Fit Wood Venetian Blind Order Form

HALLIS HUDSON
Signature COLLECTION

Account Number

Date

Account Name

Your order reference

Delivery Address

(If left blank, we will assume that delivery is to your standard delivery address)

Any additional information

Mandatory Information							Optional Information If left blank we will assume standard specification. (Please refer to product binder for standard specification and additional options)		
Qty	Slat Colour	Frame Colour	Glass Width (cm)	Glass Drop (cm)	Bead Depth (mm)	Installation Height (cm)	Control Type	Control Side	Control Drop*

* In order to conform to child safety legislation: please see Child Safety section in the price guide
If you require any assistance with filling in this form, please contact our sales office either by email; sales@hallishudson.com or phone; 01772 202202