STUDENT/SCHOOL APPLICATION AND ORDER FORM

Please make sure you complete the following information and submit to your Mac Tools Distributor. If you do not have a Mac Tools Distributor and are paying with credit card, fax completed order to 866.622.0580. If paying with a check/money order, mail to:

Mac Tools, Attn: STP, 505 N. Cleveland Ave., Westerville, OH 43082.

Any questions please e-mail to macstudenttech@sbdinc.com or call 800.MACTOOLS opt. 6

Student Name:				
Student Signature:		Date:		
Mailing Street Address:				
City:	State/Province:	Zip/Postal Code:		
Cell Phone Number:	Home Phone Num	Home Phone Number:		
E-mail Address:				
School Name:				
Instructor's Name:	Phone Number:			
Instructor's Signature:				
Distributor's Name:	Distributor #	e:District:		
Canada use only: 🖵 Post Secondary	☐ Apprentice			
SHIPPING INFOMATION				
Name of Student or School:				
Shipping Street Address:				
City:	State/Province:	Zip/Postal Code:		
FREIGHT INFORMATION (FOR TOOL BO)	(ES): CHECK HERE IF SAME AS SHIPP	ING INFORMATION ABOVE 🗆		
Name of Student or School:				
Shipping Street Address:				
City:	State/Province:	Zip/Postal Code:		





50% OFF RETAIL PRICING ON MOST MAC TOOLS BRANDED PRODUCT 25% OFF MOST DEWALT BRANDED PRODUCT 25% OFF MOST MAC WD ITEMS

MAC TOOLS PART #	DESCRIPTION	LIST PRICE	STUDENT PRIC
Discontinut de la continu	M. T. I	Tav	
products with discontinued or out or	e. Mac Tools reserves the right to substitute like f stock products. Certain class codes do not apply. reported within 30 days of shipping.		
	CHECK NUMBER: be charged for items when they ship. If any item is on r them as they ship. This may result in multiple charge		m different
Credit Card #:		Expiration D	ate:
Card Holder's Name:			
Card Holder's Signature:			
Card Holder's Street Address: _			
City:	State/Province:	Zip/Postal Code:	
Card Holder's Phone Number: _ Mac Credit* Visa	Master Card □ Discover □ American Expres	ss	