



Delivery Application

1231 Chicago Ave Evanston, IL 60202
847-475-8133
soapiescleaners@gmail.com

Please fill out this simple form and hand it to the store manager!

Tell us about yourself

Name _____ Significant Other _____

Address _____ City _____ Zip Code _____

Cell Phone _____ Home Phone _____ Email _____

Billing Address (if different) _____

Delivery Days: Monday & Thursdays Monday (drop-off Thursday) Thursday (drop-off Monday)

Delivery Fee of \$3.50 will be added per scheduled pick-up session

Plastic Option: Yes No

Reusable Garment Bags Can be Purchased at Minimal Cost

How do you like your cleaning?

Laundered Shirt Preference: Hanger Boxed Starch : None Light Medium Heavy

Special Instructions _____

Repairs

Perform Repairs up to \$12 As Necessary (please check one): Yes No

Automatic Button Repair \$2.50 each (please check one): Yes No

How would you like to pay?

Credit Card Type: Visa MasterCard

Name as it appears on the Card

Card Number _____ Exp Date _____ Cvv2 Code _____

Please read Before Submitting: I understand that, with my submission, I acknowledge that all information provided to Soapie's is correct and truthful. I hereby give Soapie's permission to charge my credit card in full for cleaning orders. It is my full responsibility to check this order carefully and report any errors within 7 days. All orders must be picked up within 30 days of being dropped off.

Signature _____ Printed Name _____ Date _____