CUPCAKE ORDER FORM



509-593-0844
Walla Walla, WA
info@cakesplosionz.com
social @cakesplosionzbakery

CUSTOMER INFORMATION					PAYMENT METHOD (CIRCLE)				
NAME						1	=	_	S
ADDRESS					Cash	(Credit C	ard	Apple Pay
PHONE					D	ELIV	ERY (CIRC	LE)
EMAIL								_	,
ORDER INFORMATION						Pick	Up	Deliv	/ery
DATE NEEDED					# CUPCAKES				
CUPCAKE CHOICE			RASPBE PINA CO COOKIE MINT CH	DLADA DOUGH HOCOLA	TE CHIP	☐ CARROT CAKE ☐ RED VELVET ☐ GERMAN CHOCOLATE ☐ STRAWBERRY ☐ LEMON			
DESIGN NOT	ES								
Please be speci [,] colors, theme, e									
EDIBLE IMAG	ES NO								
			BAKERY	QUOTE	E				
SUBTOTAL		TAXES		DE	EPOSIT DUE		TOTAL		L
				1					

By signing below, the Customer agrees to the terms of the quote and acknowledges that deposits are non-refundable if the order is canceled within 14 days of the event. Customer also understands that Cakesplosionz may exercise creative discretion when designing cakes inspired by customer-provided ideas and images.

CUSTOMER SIGNATURE

DATE