

# INTENTION CANDLE ORDER FORM

## AMPLIFIED AURA

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Louisville, KY

### ORDER INFORMATION

ORDER DATE

I WANT HERBS/FLOWERS

I WANT CRYSTALS

| Hand Rolled | Mold | Qty | Color        |
|-------------|------|-----|--------------|
|             |      |     | Black        |
|             |      |     | Pearl        |
|             |      |     | Teal         |
|             |      |     | Brown        |
|             |      |     | Green        |
|             |      |     | Blue         |
|             |      |     | Pink         |
|             |      |     | Purple       |
|             |      |     | Gold         |
|             |      |     | Orange       |
|             |      |     | Surprise Me! |

### CUSTOMER INFORMATION

NAME

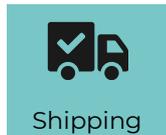
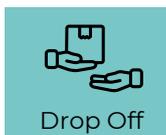
ADDRESS

EMAIL/PHONE

### PAYMENT METHOD



### DELIVERY METHOD



DESCRIBE ANY WELLNESS AREAS YOU WOULD LIKE TO ADDRESS SO I CAN CHOOSE THE HERBS OR YOU CAN NAME A FEW YOU LIKE TO COMMONLY USE. (EXAMPLE: INSOMNIA)

### BELOW FOR CREATOR

SHIPPING DATE:

ORDER#:

SHIPPING TRACKING#

PROMISE DATE:

|                  |  |
|------------------|--|
| <b>SUBTOTAL</b>  |  |
| <b>DISCOUNTS</b> |  |
| <b>SHIPPING</b>  |  |
| <b>TOTAL</b>     |  |

NOTES