



The latest version of Adobe Reader is required to use this form. [Download HERE](#)

Imprinting Order Request Form

If you would like to imprint your order, fill out all of the fields in this digital order request form using **Adobe Reader** (click to download latest version). Once you are finished, save the Adobe Acrobat PDF document to your desktop. Attach the document in an e-mail, and send it to us at imprinting@maxill.com. Once we have received your order request form, a sales representative will contact you within 2 business days to verify your order. **For more information visit www.maxill.com/imprinting**

Office Name: _____ Date: _____ Customer No.: _____
(If previous customer)

Office Phone Number: _____ Full Address: _____

Office Fax Number: _____

E-mail: _____ Website: _____ Product Quantity: _____

Imprintable Products

The products listed in the chart below are imprintable products. Select one product below. Refer to this chart to verify how many lines of text are available for each product. **You must fill out a separate order request form for each product.**

| Select One | Product | Max. Number of Text Lines |
|-----------------------|---|---------------------------|
| <input type="radio"/> | Toothbrush | 2 lines of text |
| <input type="radio"/> | Denture Brush #00002 | 2 lines of text |
| <input type="radio"/> | Deluxe Toothbrush Travel Case #40016 | 2 lines of text |
| <input type="radio"/> | M-Lyd Denture Bath #40012 | 4 lines of text |
| <input type="radio"/> | Classic Denture Bath #40013 | 4 lines of text |
| <input type="radio"/> | Mouth Guard Box #40011 | 4 lines of text |
| <input type="radio"/> | Retainer Box #40014 | 4 lines of text |

| Select One | Product (Con't) | Max. Number of Text Lines |
|-----------------------|-------------------------------------|---------------------------|
| <input type="radio"/> | Tooth Fairy Box #40015 | 3 lines of text |
| <input type="radio"/> | PerioX STIM-U-STICKS Case #40040 | 3 lines of text |
| <input type="radio"/> | PerioX Interdental Case #40060 | 3 lines of text |
| <input type="radio"/> | Tongue Scraper #00007 | 2 lines of text |
| <input type="radio"/> | Ortho Wax Case #41115 - 41119 | 3 lines of text |
| <input type="radio"/> | Brushing Timer #00003 | 2 lines of text |

Customer Logo or Supplied Artwork

If you are submitting a logo or artwork, please e-mail it to imprinting@maxill.com along with this order request form. The artwork must be provided in the proper digital format. We accept vector based files such as Adobe Illustrator, .EPS and/or Corel Draw. If the logo is a raster based format the resolution must be a minimum of 300 PPI (pixels per inch). We will accept .PSD, .TIFF, and/or .PDF. Low resolution .JPEG, .BMP or .GIF are NOT acceptable. **If you have any questions pertaining to artwork file formats, please call us at 1-800-268-8633.**

Yes, I am supplying a logo/artwork.

No, I am not supplying a logo/artwork.

maxill
1-800-268-8633

fax: (519) 631-3388
www.maxill.com/imprinting

e: imprinting@maxill.com

*Please be advised that colours may appear different as a result of variances in different monitor calibrations.

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Replaces: 16/06/2017

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Imprintable Information

Please refer to the chart above to determine how many lines of text are available for the product you've selected. On the lines below, type the information that you would like imprinted on the product. Include any special instructions.

Special Instructions: (ie. uppercase, bold, logo placement, etc.)

Line 1: 1:
Line 2: 2:
Line 3: 3:
Line 4: 4:

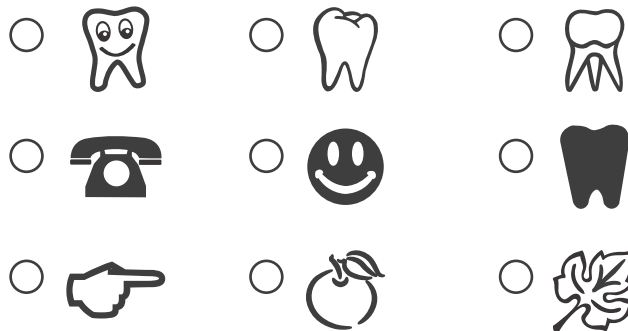
Font Options

Please choose from the fonts listed below.
(You may choose a maximum of 2 fonts)

1. **Helvetica**
2. **Avant Garde**
3. **Myriad Pro**
4. **Stone**
5. **Versa Black**
6. **Impact**

Icon Options

If you would like to add an icon to your imprinting order (no extra charge), select **one** that you would like to use.



Record Your Font Choice

Please refer to the font choices listed above. **You can choose a maximum of 2 fonts.** Record your font choice for each line of text (based on the maximum number of lines of text specified in the chart on the first page).

Line 1 - FONT CHOICE:

Line 2 - FONT CHOICE:

Line 3 - FONT CHOICE:

Line 4 - FONT CHOICE:

Please see the following page to select an ink colour based on our recommendations for various products.

Imprinting Order Request Form

Ink Color Selection

| Item | Ink Colors Available |
|---------------------------|---|
| Toothbrush - 220 | Black ink is standard, Gold ink is possible |
| Toothbrush - 330 | Black ink is standard, Gold ink is possible |
| Toothbrush - 350 | Black ink is standard, Gold ink is possible |
| Toothbrush - 355 | Black ink is standard, Gold ink is possible |
| Toothbrush - 415 | Black ink |
| Toothbrush - 440 | Black ink is standard, Gold ink is possible |
| Toothbrush - 505 & 509 | Black ink |
| Toothbrush - 630 & 640 | Gold ink |
| Toothbrush - 735 | Black Ink |
| Bucky Beaver Toothbrush | Black ink |
| Ducky Toothbrush | Black ink is standard, Gold ink is possible |
| Denture Brush | Black ink |
| Toothbrush Travel Case | Gold ink or Black ink |
| Classic Denture Bath | Black ink is standard, Gold ink is possible but not recommended |
| M-Lyd Denture Bath | Black ink is standard, Gold ink is possible but not recommended |
| Mouth Guard Box | Gold ink only for Black, Blue and Purple boxes. Black ink for all other colored boxes. (Gold is not recommended for Yellow, White, Red, Green, Translucent and Orange colored boxes) |
| Retainer Box | Black ink is standard, Gold ink is possible (Gold is not recommended for Glow or Neon Green colored boxes) |
| Tooth Fairy Box | Black ink |
| Ortho Wax Case | Black ink |
| PerioX STIM-U-STICKS Case | Black ink |
| PerioX Interdental Case | Black ink |
| Brushing Timer | Black ink |

Please Note: Gold ink is **not** recommended for any light coloured items. There is only one ink colour allowed per minimum order.

Use the drop-down menu below to select your ink colour.

Ink Colour:

Once you have completed this form, save the document to your desktop. Attach the document into an e-mail and send it to **imprinting@maxill.com**. Remember to attach any additional artwork you wish to include for your imprinting order. Once we have received your imprinting order request form, a sales representative will contact you within 2 business days to verify your order. Visit **www.maxill.com/imprinting** for more information on imprinting or call **1-800-268-8633**.