



DATE: _____

Table Cloth/Runner Request Form

NAME: _____

PHONE/EMAIL: _____

SIDEMARK: _____

ROOM: _____

TABLE CLOTH OR RUNNER: _____

ADDITIONAL NOTES:

FABRIC NAME	
WIDTH	
VERTICAL REPEAT	
HORIZONTAL REPEAT	
RAIL ROAD: YES OR NO	
FABRIC TYPE	

QTY	
FW	
FL	
DIAMETER	
LINING: YES OR NO	
LINING COLOR: WHITE OR IVORY	

Please complete all fields on the first page of this form and email it to

ORDERS@CMPILLOWS.COM

Do not hesitate to contact Christina at 303-877-3404 if you have any questions.

