

Order Received: _____

Order Shipped: _____

Order #: _____



**Gillette
Children's**

Specialty Healthcare

200 University Avenue East

St. Paul, Minnesota 55101

Phone (651) 325-2320

Fax (651) 229-1737

**DVD/CD-ROM
ORDER FORM**

PLEASE FAX ORDER FORM TO 651-229-1737 – Attn: Jodi Ogren, Publications

Item	Type	ID	QTY	Unit Price	Amount
<i>Arthritis in Children: A Hidden Disease</i>	DVD	D1		\$19.99	
<i>Casting Techniques</i>	DVD	D12		\$39.99	
<i>Lower Extremity Skin Care for Adults</i>	DVD	D13		\$ 9.99	
<i>Lower Extremity Skin Care for Children</i>	DVD	D14		\$ 9.99	
<i>Normal Gait</i>	DVD	D4		\$39.99	
<i>Principles of Pathologic Gait in Cerebral Palsy</i>	DVD	D5		\$39.99	
<i>Running and Sprinting: A Dynamic Analysis</i>	CD-ROM	C6		\$39.99	
<i>Running: Injury Mechanisms & Training Strategies</i>	CD-ROM	C11		\$39.99	
<i>Scoliosis Screening for Students</i>	DVD	D7		\$ 9.99	
<i>Scoliosis Screening for Early Detection</i>	DVD	D8		\$19.99	
SUBTOTAL					
6.5% tax (MN only) 7.0% tax (St. Paul only)					
If you have a tax exempt number, please include it here:					
SHIPPING and HANDLING \$5.00 within continental United States shipped by U.S. Postal Service) Price to be determined in the following cases: - Orders outside the continental United States - Next-day and two-day shipping					
TOTAL					

PLEASE SELECT A PAYMENT METHOD:

<u>CREDIT CARD: VISA OR MASTERCARD*</u>	<u>CHECK</u>	<u>PURCHASE ORDER NUMBER</u>
1. Card Number:	Payable to: Gillette Children's Specialty Healthcare	
2. Number on the back of the card:		
3. Expiration Date:		
4. Name on card:		

<u>BILLING ADDRESS*</u>	<u>SHIP TO ADDRESS</u>	<u>CONTACT INFORMATION</u>
Name:	Name:	Name:
Organization:	Organization:	Phone Number:
Address 1:	Address 1:	Fax Number:
Address 2:	Address 2:	Email Address:
City, State and ZIP:	City, State and ZIP:	

*If you pay with a credit card, the credit card billing address is required.

THANK YOU FOR YOUR ORDER. PLEASE CALL 651-325-2320 WITH ANY QUESTIONS.

Revised: 01/18/12