Order Form
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Discipline/role: ________________________________________________________________________________________________

My role is primarily:
❑ Faculty/teacher  ❑ Clinician  ❑ Administration  ❑ Clergy  ❑ Community leader  ❑ Volunteer  ❑ Family member
❑ Other (please specify) ________________________________________________________________________________________

I intend to use this film for: (please check all that apply)
❑ Teaching students (please specify disciplines and level – graduate, undergraduate, high school, other) ________________________
____________________________________________________________________________________________________________
❑ Teaching professionals (please specify disciplines) _________________________________________________________________
❑ Advocacy within my institution  ❑ Advocacy within the health community  ❑ Legislative/governmental advocacy
❑ Family support programs  ❑ General community awareness  ❑ Personal use
❑ Other (please specify) ________________________________________________________________________________________

I heard about the DVD from:
❑ Professional conference  ❑ Website  ❑ Colleague or friend
❑ Other (please specify) ________________________________________________________________________________________

Please accept my order for:

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<thead>
<tr>
<th>Quantity</th>
<th>Price</th>
<th>Total</th>
</tr>
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<tbody>
<tr>
<td></td>
<td>$59/each</td>
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<tr>
<td></td>
<td>Shipping and handling (in the U.S.) $3.50</td>
<td>$3.50</td>
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<td>Sales tax 7%</td>
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<td>Amount enclosed/charged</td>
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* If tax exempt, please indicate number and include a copy of your “Certificate of Exemption” with your order. Purchase Orders are welcome.

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