

United States Order Form



Shipping Information

Name:	
Organization:	Telephone:
Address:	E-mail:
City, State:	Zip:

Product Description

<i>MOVE Reference Manual</i>	\$200.00 ea.	x Quantity _____ =	\$
<i>MOVE Assessment Profile</i>	\$16.00 ea.	x Quantity _____ =	\$
<i>MOVE MTC Manual</i>	\$50.00 ea.	x Quantity _____ =	\$
<i>No Ordinary MOVE (Linda Bidabe)</i>	\$20.00 ea.	x Quantity _____ =	\$
<i>Children w/ Severe Disabilities & the MOVE Curriculum (Gilbert Thomson, PT)</i>	\$25.00 ea.	x Quantity _____ =	\$

Billing Information

Name:	<i>Product subtotal</i> \$ <i>CA residence 7.5% sales tax</i> \$ <i>10% Shipping & Handling (before model site discount)</i> \$ <i>Model Site Discount (25% before S&H)</i> \$ Order Total \$
Payment Method: <input type="checkbox"/> Visa <input type="checkbox"/> Mastercard	
Credit Card No:	
Expiration Date:	
3 Digit Security Code: Zip Code:	

Signature: _____

P.O. Attached#: _____

Check Included#: _____

Please mail or email completed order form to:

MOVE International
PO Box 12453
Bakersfield, CA 93389
(661) 703-6170

E-mail: jusues-delaney@moveintl.org
<http://www.move-international.org>