C\$) EMERGENCYID

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STEP Select the product you want and enter the product name or SKU here: Purchase a Prepaid Card from your Retailer. Scratch to expose the code and enter it here: STEP Enter your length and the information to be engraved: STEP Length: Engraving: 12345678901234567 12345678901234567 12345678901234567 12345678901234567 12345678901234567

STEP	Enter your Name and Mailing Address:	
4	First Name	Last Name
	Address	
	City/Province	Postal Code
	Telephone	Email (customer or pharmacy)
STEP	Sign below, and send this form to Emergen	cyID for processing.
J	by mail: Emergency ID 517462 County Road 124 Melancthon ON L9V 1V7	fax: 519.925.0336 or scap and omail: orders@emergencyid.ca

I confirm my engraving is correct, and understand that all sales are final for custom engraved products. I accept the Terms and Conditions available at www.emergencyid.ca and from partner Retailers.

Canada

Signature:

Date:

scan and email: orders@emergencyid.ca

Dog Tag Emblem

ORDER FORM Customer Service: 1.888.999.3963

STEP

Purchase a Prepaid Card from your Retailer. Scratch to expose the code and enter it here:

STEP **2**

Enter the information to be printed:

dress	
y/Province	Postal Code
enhone	Email (customer or pharmacy)
ephone	Email (customer or pharmacy)

STEP 4

Sign below, and send this form to EmergencyID for processing.

by mail: Emergency ID 517462 County Road 124 Melancthon ON L9V 1V7 Canada fax: 519.925.0336 or scan and email: orders@emergencyid.ca

ID Tags

ORDER FORM Customer Service: 1.888.999.3963

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Signature:

Date:

EXAMPLE 2 EMERGENCYID Bracelet - Large Emblem ORDER FORM Customer Service: 1.888.999.3963

STEP	Select the pr	oduct you w	ant and	enter th	e proc	luct n	ame d	or SK	U her	e:		Clasp	о Туре	e:		
STEP 2	Purchase a F	Prepaid Card	d from y	our Reta	ailer. S	Scratc	h to e	expos	e the	code	and e	nter i	t here	9:		
STEP 3	Enter your le Length:	ength and th Engraving		nation to	be ei	ngravo	ed:									
•]]	
1234567890 1234567890 1234567890 1234567890 1234567890	1234567 1234567 O 1234567															
STEP 4	Enter your N First Name	lame and Ma	ailing Ac	ldress:		Last I	Name	2								
	Address															
	City/Provinc	e										Posta	l Cod	e		
	Telephone	-	_				Emai	il (cu:	stome	er or p	harm	nacy)] [1 [
STEP	Sign below, a	and send thi	is form t	o Emer	qencvl	ID for	proce	essin	a.							

ıy

by mail: Emergency ID 517462 County Road 124 Melancthon ON L9V 1V7 Canada

fax: 519.925.0336

or

scan and email: orders@emergencyid.ca

I confirm my engraving is correct, and understand that all sales are final for custom engraved products. I accept the Terms and Conditions available at www.emergencyid.ca and from partner Retailers.

Signature:

Date:

EMERGENCYID Necklace **ORDER FORM** Customer Service: 1.888.999.3963 Select the product you want and enter the product name or SKU here: STEP

₽	Purchase a Prepaid Card from your Retailer. Scratch to expose the code and enter it here:
	Enter your length and the information to be engraved:
З	Length: Engraving:
U	
123456	
12345678 12345678	
12345678 12345678	012345 /
EP	Enter your Name and Mailing Address:
Δ	First Name Last Name
	Address
	City/Province Postal Code
	Telephone Email (customer or pharmacy)

517462 County Road 124 Melancthon ON L9V 1V7 Canada I confirm my engraving is correct, and understand that

scan	and	email:	order

Signature:

all sales are final for custom engraved products. I accept the Terms and Conditions available at www.emergencyid.ca and from partner Retailers.

Date:

or rs@emergencyid.ca

EXAMPLE 2 ENERGENCIA Bracelet - Small Emblem ORDER FORM Customer Service: 1.888.999.3963

STEP	Select the pro	oduct you want and enter the product name or SKU here: Clasp Type:
TEP 2	Purchase a P	Prepaid Card from your Retailer. Scratch to expose the code and enter it here:
TEP 3	Enter your le Length:	ength and the information to be engraved: Engraving:
12345	567890	
12345678 12345678 12345678	901234567 901234567 901234567 901234567 901234567	
	Enter your N First Name	ame and Mailing Address:

City/Province	Postal Code
Telephone	Email (customer or pharmacy)



Sign below, and send this form to EmergencyID for processing.

by mail: Emergency ID 517462 County Road 124 Melancthon ON L9V 1V7 Canada

fax: 519.925.0336

or scan and email: orders@emergencyid.ca

Scan and chiatt. There is a single shirt ge

I confirm my engraving is correct, and understand that all sales are final for custom engraved products. I accept the Terms and Conditions available at www.emergencyid.ca and from partner Retailers. Signature:

Date:

ate:

Wallet Card ORDER FORM Customer Service: 1.888.999.3963

Ρι	rchase a Prepaid Card from your Retailer. S	cratch to expose the code and enter it here:							
 Er	ter the information to be printed:								
Le	ft Column	Right Column							
Er	er your Name and Mailing Address:								
		Last Name							
Ac	dress								
City/Province Postal Code									
le	ephone	Email (customer or pharmacy)							
Si	n below, and send this form to Emergency	D for processing.							
by	mail: Emergency ID 517462 County Road 124 Melancthon ON L9V 1V7 Canada	fax: 519.925.0336 or scan and email: orders@emergencyid.ca							
all Lao	nfirm my engraving is correct, and understand tha ales are final for custom engraved products. cept the Terms and Conditions available at w.emergencyid.ca and from partner Retailers.	Signature:							