

a-morir

NEW YORK

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orders@a-morir.com

Please return this completed form along with a copy of your prescription* (via scan or smartphone photo) and email both documents in the same email to orders@a-morir.com with PRESCRIPTION and your order number in the subject field. Not following these instructions will result in a delay in processing your order.

*required by law

Eyeglass Prescription Form 2019

Order Number _____

Legal first / last name of prescription owner*: _____

*required by law

PD (Pupillary Distance) Measurement: _____

Lens Type (please check ONE)

Single Vision Lens:

Polycarbonate - 165 USD _____

Trivex (ultra clear) - 225 USD _____

1.67 High Index (thinner) - 225 USD _____

1.74 High Index (thinnest) - 325 USD _____

Progressive Lens:

Polycarbonate 295 USD _____

Trivex (ultra clear) - 345 USD _____

1.67 High Index (thinner) - 325 USD _____

1.74 High Index (thinnest) - 395 USD _____

All lenses come with a complimentary premium anti-reflective hard coat (\$60 value)