Billing Address (must match credit/debit card, if applicable):

☐Mr. ☐Mrs. ☐ Ms. _____

Address _____

City _____ State _____ Zip _____

Phone (_____) _____ Country _____

Shipping Address (if different from Billing Address):

☐Mr. ☐Mrs. ☐ Ms. _____

Address _____

City _____ State _____ Zip _____

Phone (_____) _____ Country _____

Email Address _____

ITEM NO.	ITEM DESCRIPTION	QTY	UNIT PRICE	ITEM TOTAL
			$	$
			$	$
			$	$
			$	$
			$	$

Shipping Rates to Contiguous US (allow 3-7 business days for delivery)

- $7.95 - orders up to $24.99
- $9.95 - orders $25.00 to $58.99
- FREE - orders $59.00 and up!
- FREE - APO/FPO addresses!

Shipping to AK, HI, US Territories and Protectorates (allow 10-14 business days for delivery) - Add $7.00 to standard shipping cost.

ORDER SUBTOTAL	$
COUPON CODE: _____	$
OK RESIDENTS ADD 8.625% SALES TAX	$
ADD SHIPPING IF LESS THAN $59	$
TOTAL AMOUNT ENCLOSED	$

PAYMENT METHOD: NO C.O.D.s ☐ CHECK ☐ MONEY ORDER

Make checks/money orders payable to EMU THERAPY.

Mail to: PO Box 57064, Oklahoma City, OK 73157

Signature _____

CREDIT CARD ☐ VISA ☐ MasterCard ☐ American Express ☐ DISCOVER

CARD NO. ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

EXP. DATE ☐☐/☐☐ CVC# (back of card) ☐☐☐☐

Billing Address (must match credit/debit card, if applicable):

☐Mr. ☐Mrs. ☐ Ms. _____

Address _____

City _____ State _____ Zip _____

Phone (_____) _____ Country _____

Shipping Address (if different from Billing Address):

☐Mr. ☐Mrs. ☐ Ms. _____

Address _____

City _____ State _____ Zip _____

Phone (_____) _____ Country _____

Email Address _____

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CARD NO. ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

EXP. DATE ☐☐/☐☐ CVC# (back of card) ☐☐☐☐