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## OPTICAL GOGGLE ORDER FORM

Clear Lens	Quantity	Smoked Lens	Quantity	Different Prescription Powers for each eye Please Specify:	
-150		-150		Right Lens -150	Left Lens - _____
-200		-200		Right Lens -200	Left Lens - _____
-250		-250		Right Lens -250	Left Lens - _____
-300		-300		Right Lens -300	Left Lens - _____
-350		-350		Right Lens -350	Left Lens - _____
-400		-400		Right Lens -400	Left Lens - _____
-450		-450		Right Lens -450	Left Lens - _____
-500		-500		Right Lens -500	Left Lens - _____
-550		-550		Right Lens -550	Left Lens - _____
-600		-600		Right Lens -600	Left Lens - _____
-650		-650		Right Lens -650	Left Lens - _____
-700		-700		Right Lens -700	Left Lens - _____
-750		-750		Right Lens -750	Left Lens - _____
-800		-800		Right Lens -800	Left Lens - _____
-850		-850		Right Lens -850	Left Lens - _____
-900		-900		Right Lens -900	Left Lens - _____
-10		-10		Right Lens -10	Left Lens - _____

**Special Instructions:** \_\_\_\_\_

**Credit Card** \_\_\_\_\_ **Exp:** \_\_\_\_/\_\_\_\_

**CC Billing Info** \_\_\_\_\_