

2019–2020 Order Form



| Billing Information | |
|-------------------------------------------------|-----|
| Name | |
| Title | |
| School/Church <small>(if applicable)</small> | |
| Address | |
| City | |
| State | Zip |
| Daytime Phone () | |
| Fax () | |
| Email | |

| Shipping Information | |
|---------------------------------------------------------------|-----|
| <input type="checkbox"/> Check if same as Billing Information | |
| Name | |
| Title | |
| School/Church <small>(if applicable)</small> | |
| Address | |
| City | |
| State | Zip |
| Daytime Phone () | |
| Email | |

| Payment Information | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <input type="checkbox"/> Check enclosed payable to Positive Action for Christ | |
| <input type="checkbox"/> Charge existing Positive Action for Christ customer account <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px 0;"></div> | |
| Purchase Order Number <div style="border: 1px solid black; width: 100px; height: 20px; display: inline-block;"></div> | |
| Account Name | |
| Charge my <input type="checkbox"/> American Express <input type="checkbox"/> Discover <input type="checkbox"/> MasterCard <input type="checkbox"/> Visa | |
| Card Number <div style="border: 1px solid black; width: 100px; height: 20px; display: inline-block;"></div> | |
| Expiration Date <div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div> | |
| Signature | |
| Print name | |

Please print.

| Item # | Product Description | Qty. | Price | Total |
|--------|---------------------|------|-------|-------|
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|  <input type="checkbox"/> Please send a free Elementary Scope & Sequence. |  <input type="checkbox"/> Please send a free Secondary Scope & Sequence. | Free |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|

| | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|--|
| <p>Shipping Rates</p> <p>For Billed Orders We charge shipper's list price, which will be reflected on your invoice.</p> <p>For Prepaid Orders Shipping is 15% of the total. Option available only in the continental United States.</p> <p>Handling Rates \$1.50 for orders up to \$49.99 \$2.50 for orders between \$50.00 and \$99.99 \$5.00 for orders \$100.00 and over</p> | Order Subtotal | |
| | 6.75% Sales Tax (NC only) | |
| | Shipping Charges | |
| | Handling Charges | |
| | Total | |

Payment must accompany orders placed by individuals or from outside the United States. Payment must be made in U.S. funds.

Taxes are collected according to North Carolina law, which is subject to change without notice.

Prices subject to change without notice.



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