

**Church Health Services**  
**308 Oneida St.**  
**Beaver Dam, WI 53916**

**Fax and Mail Order Form**  
[www.churchclinic.org](http://www.churchclinic.org)

**Office (920)887-1766**  
**Fax (920)887-9487**  
**e-mail [info@churchclinic.org](mailto:info@churchclinic.org)**

**Instructions**

1. Orders may be placed by fax or mail by printing and completing this form.
2. Poster may be viewed in Health Resources on web site.
3. Poster available in original 13x20 size or 8 ½ x 11 color copy.
4. Clearly select numbers of respective items desired, enter total prices and subtotal.
5. See second page for calculating **Total Shipping and Handling** charges.
6. Allow 5-10 days for delivery.
7. Enclose payment by check or credit card.
8. Contact CHS with any questions.
9. **Professionally matted and framed 13x20 posters** also available by contacting CHS.

Item Description	Qty.	Unit Price	Total Price
My Building Blocks for Health Poster – Unframed 13x20		\$4.00	
My Building Blocks for Health Color Copy – Unframed 8 ½ x 11		\$1.50	
<b>Subtotal</b>			
<b>Total Shipping &amp; Handling</b>			
<b>TOTAL AMOUNT</b>			

**Ship To:** Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City/State/Zip \_\_\_\_\_  
 Daytime Phone: ( ) \_\_\_\_\_ - \_\_\_\_\_ Evening Phone: ( ) \_\_\_\_\_ - \_\_\_\_\_

**Method of Payment**

My check or money order payable to *Church Health Services, Inc.* is enclosed.

Please charge \$\_\_\_\_\_ to my

Visa       MasterCard

-     -     -

Card Number

-

Exp. Date (required)

Signature \_\_\_\_\_ Date \_\_\_\_\_

(as shown on card)

## Shipping and Handling Charts

<b>POSTER 13x20</b>	
Quantity	S&H Cost
1-4	4.00
5-9	5.00
10-20	7.00
21-30	8.00
31-40	9.00
41-50	10.00
>50	CALL

<b>POSTER COPY 8 1/2x11</b>	
1-4	2.20
5-9	2.50
10-20	2.80
21-30	3.20
31-40	3.60
41-50	4.00
>50	CALL

<b>Total Shipping &amp; Handling</b>	
Poster 13x20	
Poster Copy 8 1/2x 11	
Total Shipping & Handling	