



PAL® Services/WAP, Inc.

Materials Order Form



This form MUST accompany all payment information.

NOTE: Material Packets/Manuals may ONLY be supplied to people who have completed a PAL® Services sponsored Adult Training.

Name: _____ Date Trained: _____

Organization/School/ISD: _____

Email: _____

Billing Address: _____ Shipping Address: [] Check if same

Street _____

Street _____

City _____ State _____ Zip _____

City _____ State _____ Zip _____

Phone: _____

Phone: _____

Fax: _____

Fax: _____

Materials (When ordering multiple Packets/Manuals, please **list each person** who will receive materials and the **dates they were trained**. Not required for Student Handbooks. Material Packets include one Student Handbook.)

High School Material Packet (2003 Edition).....QTY _____ x \$160 per unit = Total \$ _____

Middle School Material Packet (2003 Edition).....QTY _____ x \$160 per unit = Total \$ _____

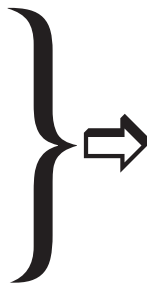
Elementary School Manual.....QTY _____ x \$160 per unit = Total \$ _____

High School Student Handbook.....QTY _____ x \$10 per unit = Total \$ _____

Middle School Student Handbook.....QTY _____ x \$10 per unit = Total \$ _____

Standard Shipping and Processing Charges

For orders subtotaling	S/H Charge
\$15.00 and less	\$4.95
\$15.01 to \$25.00	\$6.00
\$25.01 to \$45.00	\$8.00
\$45.01 to \$65.00	\$11.00
\$65.01 to \$90.00	\$14.00
\$90.01 to \$125.00	\$17.00
\$125.01 to \$200.00	\$21.00
\$200.01 + over	add 10% of total



SUBTOTAL = \$ _____

SHIPPING = \$ _____

TOTAL = \$ _____

Method of Payment: (Please provide Check/PO # and copies of your PO with your order)

Check # _____ PO # _____

Please submit this form and all payments to:

Workers Assistance Program, Inc.

4115 Freidrich Lane, Suite 100 Austin, TX 78744

Phone: 800-522-0550 Fax: 512-345-5366

****For Use at Registration Only****

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Total Paid: \$ _____ **Balance Due:** \$ _____ **Initials of PAL® Staff Verifying transaction:** _____

When a balance remains, the responsible organization will be mailed an invoice.

I acknowledge receipt of the materials indicated above and certify that the above organization is aware of the transaction.

Signature: _____ Date: _____