

Order Form

Name:			
Address:			
City/State/Zip:			
Daytime Phone: (please specify if Home, Business or Mobile):			
AANA Member Number: (if applicable) If you are a Student, please indicate what Program Name, City and State:			
Choose Method of Payment			
<input type="checkbox"/> Check or Money Order made payable to AANA. Do not send Cash.			
<input type="checkbox"/> I would like to charge my order to my credit card			
<input type="checkbox"/> Visa			
<input type="checkbox"/> MasterCard			
<input type="checkbox"/> Discover			
<input type="checkbox"/> American Express			
Credit Card Number:			
Verification Number (CID Code)			
Expiration Date: ___/___			
Signature: _____			
Qty	Description/Item#	Cost per Unit	Total Cost
		Sub Total	
	Illinois Residents <i>only</i> add 9.50% Sales Tax		
	Washington D.C. Residents <i>only</i> add 6% Sales Tax		
		Shipping % Handling (see below)	
		Total	
Shipping and Handling Chart:			
1-5 lbs. add \$8.50	26-30 lbs. add \$24.50	51-55 lbs. add \$48.50	
6-10 lbs. add \$10.50	31-35 lbs. add \$28.50	56-60 lbs. add \$53.50	
11-15 lbs add \$13.50	36-40 lbs. add \$33.50	60lbs. and above please call	
16-20 lbs. add \$16.50	41-45 lbs. add \$38.50		
21-25 lbs. add \$20.50	46-50 lbs. add \$43.50		