



Centre for Health Promotion
UNIVERSITY OF TORONTO

CANADIAN ORDER FORM

Name _____ Title _____

Organisation _____

Address (no post box numbers please) _____

City _____ Prov. _____ Postal Code _____

Telephone Number (_____) _____ Fax Number (_____) _____

Authorised Signature _____ Purchase Order Number _____

SHIP TO Address (if different from above) _____

| CODE # | TITLE | PRICE PER COPY | # OF COPIES | TOTAL |
|--------|-------|-------------------|----------------|-------|
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Method of Payment

- ☐ Cheque/money order enclosed (payable to the University of Toronto)
- ☐ Invoice requested (minimum order \$100)

Mail or Fax Order Form to:

Centre for Health Promotion, University of Toronto
155 College Street, Suite 400
Toronto, ON M5T 3M7 Fax: 416-971-1365

Order Subtotal:

Shipping & Handling:

Subtotal:

G.S.T. (5%)

Order Total:

Shipping and Handling: 15% of the total order cost will be charged for shipping and handling.

Delivery: Please provide a street address instead of a box number. Allow 4 weeks for delivery.

Method of Payment: Orders under \$100 must be prepaid by cheque or money order (we can not accept credit card payment). Please make payments payable to the University of Toronto. Orders over \$100 will be accepted with a purchase order number.

Prices: Prices are subject to change without notice.