## **Global Dental Relief Appreciation Gift 2019 ORDER FORM**

Contact Information Name:	Phone:	
Address:	City	State: Zip:
Email:		
Quantity and Message I would like to purchase (note quantity below):		
GDR 2019 Signature "Ch	nange the World" Tote Bag w	vith matching pouch
GDR 2018 Signature "Ch	ange the World" Tote Bag A	appreciation Gift
I would like to have the gift card signed as follow	vs:	
Practice Name or Personal Signature:		
Shipping Method I would like to have all gifts sent to me a	nt the address listed in the cor	ntact information.
I would like to have each gift sent directl	ly to my attached list for an a	additional \$5 per package.
Total Amount Due I am purchasing number of Appreciation	Gifts at \$35 each for a total	of \$
I would like to havenumber of gifts sent \$5 per package for a total of \$	directly to recipient(s) at an	additional cost of
Total Amount Due: \$		
Purchase Tote Bags Only (Without Greeting I would like to purchase (note quantity below) to		greeting card.
(\$20) GDR 2019 Signature	e "Change The World" Tote	Bag and Pouch
(\$15) GDR 2018 Signature	e "Change The World" Tote 1	Bag
(\$15) GDR 2017 Signature	e "Be A Traveler" Tote Bag	
Tote Bag only purchases are not wrapped. Each	h bag costs \$20 or \$15, which	h includes shipping.
I am purchasing number of Tote Bags at	\$20 or \$15 each for a total o	f \$
Total Amount Due: \$		
Payment Method		
Credit Card Number		
Expiration Date Security Cod	le	
Enclosed is my check in the amount of \$		

To order, mail this completed form to Global Dental Relief, 2090 South Grant Street \* Denver, CO 80210 or scan and email to <u>info@globaldentalrelief.org</u>. Gifts will be shipped within two weeks of receiving order. Questions, call 303-858-8857.