



National Association of Practical Nurse Education, and Services

PHARMACOLOGY and/or LONG-TERM CARE STUDY MATERIALS ORDER FORM

Completed Order Check List

Use checklist below to assure your order is complete.

- All information on order form is complete
 - Mail to: NAPNES, P.O. Box 25647, Alexandria, VA 22313
 - Fax Order Form (Credit Card Payment Only) to 301-588-2839
 - Payment Option (select one)
 - Check Enclosed (mail order form 4-6 weeks for delivery)
 - Credit Information Below (Fax or mail order form)
- Make sure information is legible allow 2-3 weeks delivery

SHIPPING & CONTACT INFORMATION

Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone:(_____) _____ Work Phone:(_____) _____ Other Phone:(_____) _____

LICENSURE & IDENTIFICATION INFORMATION

LP/VNs ONLY complete this section

License Number: _____ State: _____

Social Security Number: _____ Date of Birth: _____

ORDER STUDY MATERIALS

Place a check mark next to the item(s) you wish to order, indicate quantity if you are ordering more than one:

- CDs are a 3 set review in Pharmacology
 - Yes, please send me _____ copy of the CD 3 set in Pharmacology. I am enclosing \$30 per copy x _____ copies = _____
 -
 - Yes, please send me _____ copy of the **Cassette** Review in Long-Term Care. I enclose \$30.00 per copy x _____ copies = _____
 - Yes, please send me _____ copy of the **Book** Review in Long-Term Care. I am enclosing \$25 per copy x _____ copies = _____
- Total Amount Enclosed or authorized to charge to the credit card listed below.....\$ _____ .00

Please note, all prices include domestic shipping and handling. International orders please e-mail us for shipping and handling charges

PAYMENT INFORMATION

- I am enclosing a check or money order for the amount indicated above.
 - Charge the Credit Card I've listed below
 - Check One: VISA MasterCard
- Credit Card Number: _____ Expiration Date: _____
- Signature: _____ Date: _____
- (Signature Required On Credit Card Order)