



Connecticut College of Emergency Physicians
 60 Kings Highway, North Haven, CT 06473
 DNR INFOLINE: (203)234-8766

Orange DNR BRACELET ORDER FORM

Ordering Institution/Licensed Physician: _____

Contact Person: _____

Address: _____

Phone: _____

****NUMBER OF BRACELETS REQUESTED x \$2.00 =** _____
 Adult _____ Pediatric _____

+ Shipping & Handling:	<25 bracelets	<u>no S&H charge</u>
	26-99 bracelets	<u>\$5.00</u>
	100-499 bracelets	<u>\$10.00</u>
	>500 bracelets	<u>\$15.00</u>

+ CT State Sales Tax - Amount ordered x \$.06 = _____

**** If your organization is not subject to sales tax,
 it is required that you provide the sales tax
 exemption certificate with the order form****

AMOUNT ENCLOSED: TOTAL = _____
 (no personal checks or purchase orders
 accepted, \$10.00 fee for returned checks)

Please make checks payable to the **Connecticut College of Emergency Physicians.**
 Mail order form and check to:

**CCEP-DNR
 60 Kings Highway
 North Haven, CT 06473**

NOTE: Bracelets will be mailed 1-2 weeks after receipt of check and order form.
 Orders >1000 may be delayed in shipping
 Phone/fax or emailed orders will not be accepted

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