



Order Form – Adaptive Devices

Personal information			
Name:			
Address:			
City:		Province:	Postal Code:
Daytime Phone:		Email:	

Item	Price	Quantity	Amount
Cassidy Clicker	\$ 375.00		\$
Adapted Wiimote	\$ 347.50		\$
		Total	\$

Payment method			
Credit Card	<input type="checkbox"/> Visa <input type="checkbox"/> MasterCard		
Name (exactly as it appears on your card):			
Card Number:		Expiry date (mm/yy)	
Billing address (if different from above):			
City:		Province:	Postal Code:
Signature:			
<input type="checkbox"/> Cheque (payable to "Stan Cassidy Foundation")			
<input type="checkbox"/> Money Order (payable to "Stan Cassidy Foundation")			

Shipping information (if different than personal information above)			
Name:			
Address:			
City:		Province:	Postal Code:

Orders may be submitted by email, fax, or mail. Allow 3 weeks for delivery. Only orders including payment in full will be processed. If you have any questions email us at the address below.

Email address

SCCRFoundation@HorizonNB.ca

Fax

506-452-5727

Mailing address

Stan Cassidy Foundation
 800 Priestman Street
 Fredericton, NB
 E3B 0C7