

Source Code: CDSD

This form expires October 15, 2010

**PUBLICATIONS ORDER FORM**

Federal Tax ID: 36-0724760

**ADA MEMBER NUMBER** \_\_\_\_\_  
(must appear or nonmember prices apply)

**BILL TO:**

COMPANY NAME/ORGANIZATION \_\_\_\_\_

INDIVIDUAL'S NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

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CITY STATE ZIP  
( ) ( )

DAYTIME PHONE FAX NUMBER

**SHIP TO:** (If same as "BILL TO," leave blank. Shipments cannot be made to P.O. boxes)

COMPANY NAME/ORGANIZATION \_\_\_\_\_

INDIVIDUAL'S NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

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CITY STATE ZIP  
( ) ( )

DAYTIME PHONE FAX NUMBER

PURCHASE ORDER NUMBER \_\_\_\_\_

Purchase order must be accompanied by ADA order form. We cannot accept a purchase requisition.

**All prepaid or purchase orders must include source code, which appears in upper righthand corner.**

- (CK) Check or money order enclosed.
- (CC) Charge my VISA or MasterCard.

CARD NUMBER \_\_\_\_\_ EXP. DATE \_\_\_\_\_

SIGNATURE \_\_\_\_\_

DATE OF ORDER \_\_\_\_\_

CONTACT \_\_\_\_\_

**How to Place an Order:**

- By phone** (credit card payment only), call **800/877-1600, ext. 5000**. Please have your order form completed, ADA member number available, and credit card (**VISA or MasterCard only**) ready when you call. We cannot accept purchase orders by telephone.
- By fax**, send prepaid credit card order (include authorized signature and expiration date) or company purchase order and this order form to 312/899-4899. Include ADA member number to receive member prices. We cannot accept a purchase requisition.
- By mail**, send check payable to ADA and this order form to:  
The American Dietetic Association  
P.O. Box 97215  
Chicago, IL 60678-7215
- or** send credit card payment, company purchase order (we cannot accept a purchase requisition), and this order form to:  
The American Dietetic Association  
120 South Riverside Plaza, Suite 2000  
Chicago, IL 60606-6995

Remember to include an ADA member number to qualify for ADA member price.

Qty	Cat #	Description	PRICE	TOTAL
	062506	8th Edition Study Guide for the Registration Examination for Dietitians	\$35.00	

- Orders will be shipped within two weeks of our receipt.
- All sales are final. Only ADA-authorized returns will be accepted and are subject to a 20% restock fee.

**\*SHIPPING AND HANDLING**

Shipping and handling fees are based on the amount of the order:  
US (including Puerto Rico):  
 Orders totaling \$60 or less .....\$7.50  
 Orders totaling more than \$60..... 12% of the amount of the order

International (including Canada)  
 Only credit card orders are accepted and shipping and handling charges vary by country.  
 For estimated charges, please visit [www.eatright.org/catalog/international](http://www.eatright.org/catalog/international).

International Destinations Outside of Canada: \$50.00 required minimum order.

Call Customer Service 800/877-1600 ext 5000 for rush delivery availability and pricing. Rush delivery available in the US only.

This order form expires October 15, 2010. For a current catalog or order form, visit ADA's Web site, [www.eatright.org](http://www.eatright.org), or contact ADA at [sales@eatright.org](mailto:sales@eatright.org), phone 800/877-1600 ext 5000, fax 312/899-4899.

<b>Merchandise total</b>	
<b>10.25% sales tax</b> (Illinois residents only)	
<b>Shipping and handling</b>	
<b>TOTAL AMOUNT ENCLOSED</b> (US funds only)	
TAX EXEMPT NO. _____	
Federal Tax ID: 36-0724760	