



# Subscription Order Form

**MAIL ORDER TO: SUBSCRIPTION SERVICES OF AMERICA, INC.**

P.O. BOX 820 • BELLMORE, NY 11710-0763 • TOLL-FREE (800) 603-2651 • (516) 679-8241 • FAX (516) 221-5595

**BILL TO:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

AREA CODE      TELEPHONE NO.

**SHIP TO:** \_\_\_\_\_  
 EDUCATOR'S NAME MUST APPEAR HERE  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

YOUR P.O. # (IF REQUIRED)

NO. OF SUBS.	TERM	TITLE	START DATE	UNIT PRICE	EXTENDED PRICE
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1.	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____
4.	_____	_____	_____	_____	_____
5.	_____	_____	_____	_____	_____
6.	_____	_____	_____	_____	_____
7.	_____	_____	_____	_____	_____
8.	_____	_____	_____	_____	_____
9.	_____	_____	_____	_____	_____
10.	_____	_____	_____	_____	_____
11.	_____	_____	_____	_____	_____
12.	_____	_____	_____	_____	_____
13.	_____	_____	_____	_____	_____
14.	_____	_____	_____	_____	_____
15.	_____	_____	_____	_____	_____
16.	_____	_____	_____	_____	_____
17.	_____	_____	_____	_____	_____
18.	_____	_____	_____	_____	_____
19.	_____	_____	_____	_____	_____
20.	_____	_____	_____	_____	_____

( PLEASE USE SEPARATE SHEET FOR ADDITIONAL TITLES )

**TOTAL AMOUNT**

DATE \_\_\_\_\_

AUTHORIZED SIGNATURE \_\_\_\_\_

PLEASE PRINT NAME \_\_\_\_\_