

Item #	Item Description/Name	Quantity	Price
_____	_____	_____	_____
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_____	_____	_____	_____

Please e-mail, mail or fax completed form to:  
**ASRT Merchandise Orders**  
**P.O. Box 50758**  
**Albuquerque, NM 87181-0758**  
**Fax: 505-298-5063**  
**E-mail: memberservices@asrt.org**

<b>Subtotal</b>	\$ _____
<b>7% Tax (NM residents only)</b>	\$ _____
<b>Shipping &amp; Handling</b>	\$ <b>4.95</b>
<b>ASRT Foundation Gift</b>	\$ _____
Tax-deductable contributions to the ASRT Foundation support scholarships, research and other activities.	
<b>TOTAL</b>	\$ _____

**Ordering Information**

**Delivery Time**

Allow two-to-three weeks for standard delivery. If you required express delivery, please call 800-444-2778.

**International Orders**

International orders for physical products require prior approval. Please contact Member Services at memberservices@asrt.org or 1-505-298-4500 before placing an order to be shipped outside the United States.

**Payment and Pricing Policy**

Please make check or money order drawn on U.S. funds payable to ASRT. Use black or blue ink. When you provide a check as payment, you authorize ASRT either to use information from your check to make a one-time electronic fund transfer from your account or to process the payment as a check transaction.

**Product Return and Refund Policy**

Read the complete product return and refund policy at [www.asrt.org/returnpolicy](http://www.asrt.org/returnpolicy).

**Overpayment Policy**

Overpayment of more than \$10 will be refunded immediately. Overpayments equal to or less than \$10 will be forwarded to the ASRT Foundation as a donation to the general operating fund in the name of the payer.

**Shipping Information**

Please print clearly.

Name \_\_\_\_\_ ASRT Member No. \_\_\_\_\_

Ship to \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Daytime Phone ( \_\_\_\_\_ ) \_\_\_\_\_

Ship to my home  or business  (UPS cannot deliver to a P.O. Box.)

**Method of Payment**

Full payment or purchase order must accompany this form. Check one:

- Check or money order payable to ASRT
- Purchase order (Please also e-mail your purchase order to [purchaseorders@asrt.org](mailto:purchaseorders@asrt.org) or send it by fax to 505-298-5063.)
- AmEx     Discover     MasterCard     Visa    Exp. Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Complete Card No. \_\_\_\_\_

Signature \_\_\_\_\_

*Exactly as it appears on card*