



TOTA
 TEXAS OCCUPATIONAL
 THERAPY ASSOCIATION, INC.

www.tota.org

TOTF Poster Order Form

1106 Clayton Lane, Suite 516W

Austin, Texas 78723

Phone 512-454-TOTA (8682) Fax 512-450-1777

The cost of the TOTF "State of OT" Poster is \$25 inclusive. Bills for purchase orders will be sent to the billing address below upon receipt of the order in the TOTA office. Payment must be received in the office before the poster(s) can be mailed.

(Please print or type all information)

Company Name: _____

Contact Person: _____

Billing Address: _____

Shipping Address (if different from billing address): _____

Telephone: _____ FAX: _____

Email: _____

Number of posters being ordered: _____

Amount of payment included: _____

Payment

Check # _____ Please send to TOTA Mailing Address below

Purchase order, PO # _____ Please send to TOTA Mailing Address below

Master Card Visa May be faxed to number below

Card Number: _____ Expiration Date: _____

Amount: _____ 3 Digit Security Code on card back: _____

Cardholder's Signature: _____

Cardholder's name exactly as it appears on credit card: _____

Cardholder's Billing Zip _____

TOTA reserves the right to prohibit any advertising deemed to be of inappropriate content. The advertiser agrees to hold TOTA harmless from and against any and all claims, causes of action, judgments, liabilities, damages, losses, costs and expenses, including reasonable attorneys fees arising as a result of the advertising placed. There are no refunds on ads.

Mail this form with payment to:
TOTA, Inc., 1106 Clayton Lane, Suite 516W, Austin, Texas 78723
OR fax to 512-450-1777

FOR OFFICE USE ONLY

Amount \$ _____ Date Received _____ Paid by _____

Check Number _____ Credit Approval # _____