

## **Dealer Order Form**

Fax 619.698.9500 Toll Free 800.538.2878

Ways to Order:
1. Fax completed form
2. Fill out and send with mask
3. Call and we'll be happy to help

New East Coast Location 3. (1324 US HWY 70A E Hillsborough, NC 27278 \_ \_ . . . \_

|                              |                                                         | Lens Type— Check as needed                                                                             |  |  |
|------------------------------|---------------------------------------------------------|--------------------------------------------------------------------------------------------------------|--|--|
| Today's Date                 | <del>_</del>                                            | I<br>I Single Vision                                                                                   |  |  |
| Contact Name                 | <del></del>                                             | :<br>See-Under                                                                                         |  |  |
| Patient Name                 |                                                         | High Index Single Vision : -Thinner Lens                                                               |  |  |
| Snorkeler / Diver / Photogra | apher                                                   | Exact Reading Rx                                                                                       |  |  |
| From:                        |                                                         | : Bifocal                                                                                              |  |  |
| Phone:                       | Get a head start! Fax the form before you send the mask | Stock Reader Classic Executive Power: +1.25 +2.25 +3.00    Mask: Lenses only / Mask to come / Enclosed |  |  |
|                              | you send the mask                                       | i Special Instructions:                                                                                |  |  |
| Need-by Date:                |                                                         | i Speciai iristructions.<br>I                                                                          |  |  |
| -Rush \$45 (6-8 days)        |                                                         | <br>                                                                                                   |  |  |
| -Sunar Rush \$65 (3-5 da     | ave)                                                    | •                                                                                                      |  |  |

Have you dotted your customer's pupil centers?

|     | Sph | Cyl                      | Axis | Prism |                |
|-----|-----|--------------------------|------|-------|----------------|
| R   |     |                          |      |       | Yes, we can do |
| L   |     |                          |      |       | prism!         |
| Add |     | Attach Original Rx here. |      |       | -              |

Any Prescription. Any Mask. Any Questions? Call Us!