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Order Form

SCHOOL DISTRICT		CONTACT PERSON	
SCHOOL ADDRESS		CITY	ZIP CODE
CONTACT EMAIL (THIS EMAIL ADDRESS WILL RECEIVE A LINK TO DOWNLOAD THE PROGRAM FILES.)			
CONTACT PHONE NUMBER	NUMBER OF HIGH SCHOOLS IN DISTRICT	NUMBER OF MIDDLE SCHOOLS IN DISTRICT	

Quantity	Item	Price	Total
	Complete Program	\$1,250	
	Additional High School Licenses	\$500	
	Additional Middle School Licenses	\$250	
	Module 1 Materials	\$750	
	Module 2 Materials	\$750	
Make Check or Money Order to Kost Services, LLC. Allow up to 7 business days to receive materials.		SUBTOTAL	
		TOTAL	

By purchasing a license, I agree to the following contract between Kost Services, LLC and the district I represent. I am an authorized agent of the district whose name appears on this form. As such, I agree that the district will abide by the following conditions of use:

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I agree that my district will abide by these guidelines and follow all applicable copyright laws as set forth on the copyright page of the materials. Given the personalized nature of the materials and the ability to store the material, this product is not eligible for returns. Every attempt will be made to ensure satisfaction.

Signed: _____ Date: _____

PLEASE COMPLETE THE REMAINING INFORMATION ON THE FOLLOWING PAGE

