

# Order Form

90-day money-back guarantee



unlocking potential

## How to order

**Online:**  
www.wpspublish.com

**Phone:**  
800.648.8857 or 424.201.8800

**Fax:**  
424.201.6950

**Mail:**  
625 Alaska Avenue, Torrance, CA 90503

## Order information

Product no.	Product name	Quantity	Unit price	Total

### Prices are subject to change.

If there has been a price increase in the materials listed above, please do not ship my order. Return this form to me with current prices indicated.

- Please send me a free WPS Catalog.
- I am interested in participating in standardization and validation research involving WPS tests.
- Please send me information on the WPS Online Evaluation System.
- I would like to be contacted by an Assessment Consultant.

<b>Materials total</b>	
<b>Discount code</b>	
<b>Discount %</b>	
<b>Shipping*</b>	
*Free shipping with discount code applies to orders shipped within the contiguous United States only. International shipping minimums and other exclusions apply.	
<b>Subtotal</b>	
<b>Sales tax</b>	
<b>TOTAL DUE</b>	

### Shipping address *UPS deliveries cannot be shipped to P.O. boxes.*

Check one:  Organization  Residence

Organization name (if applicable): \_\_\_\_\_ Name: \_\_\_\_\_

Professional title: \_\_\_\_\_ Highest professional degree: \_\_\_\_\_

Street address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

City: \_\_\_\_\_ State/Province: \_\_\_\_\_ ZIP/Postal code: \_\_\_\_\_ Country: \_\_\_\_\_

Daytime telephone no.: \_\_\_\_\_ Email address: \_\_\_\_\_

### Payment options

Check enclosed.

Credit card: Please charge to my credit card the correct "Total Due" based on current prices.  Visa  MasterCard  American Express  Discover

Name on credit card: \_\_\_\_\_ Phone no. (required): \_\_\_\_\_

Credit card no.: \_\_\_\_\_ Exp. date: \_\_\_\_\_ Security code: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Billing address *If different from shipping address.*

Check one:  Organization  Residence

Organization name (if applicable): \_\_\_\_\_

Street address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

City: \_\_\_\_\_ State/Province: \_\_\_\_\_ ZIP/Postal code: \_\_\_\_\_ Country: \_\_\_\_\_

Daytime telephone no.: \_\_\_\_\_ Email address: \_\_\_\_\_