

ORDER FORM

My Blood Pressure Card Materials

Return completed form by fax: 902-425-1752

| Name: | Date: | |
|---------------------------|----------------|--|
| Phone: | Email address: | |
| Organization/Affiliation: | | |
| Mailing address: | | |
| | | |
| | | |

Please indicate the quantity of each material as required.

| English General Tools | Required Quantity |
|----------------------------|----------------------|
| Wallet card | |
| Brochure | |
| Poster (8.5" x 14") | |
| French Tools | |
| Wallet card | |
| Brochure | |
| African Nova Scotian Tools | |
| Poster (8.5" x 14") | |
| New Immigrant Tools | |
| Poster (8.5" x 14") | |
| Mi'kmaq Tools | |
| Brochure | |
| Poster (8.5" x 14") | |