

# CREDIT CARD ORDER FORM

STORE...

**the rainbow project inc.**

Child & Family Counseling & Resource Clinic

831 EAST WASHINGTON AVENUE

MADISON, WI 53703

**IF PAYING BY CREDIT CARD:** Print out & complete this form. Then mail OR fax it to The Rainbow Project, Inc. at the below address/fax number.

Title...	Quantity...	Price...*	Subtotal...
A Problem Solving & Alternatives to Violence Curriculum for Preschool & Primary Age Children		\$15.00	
Parenting the Young Sexually Abused Child (text in English)		\$5.50	
Parenting the Young Sexually Abuse Child (text in Spanish)		\$5.50	
Preschooler Sexuality Guide		\$1.50	
My Mom Went to Jail		\$5.50	
The Death Next Door		\$14.95	
About Me		\$18.00	
Shipping & Handling (\$2.50 <u>per item</u> )		\$2.50	
<b>TOTAL</b>			

**PAYMENT CAN BE MADE BY MASTER CARD OR VISA...**

**DAYTIME TELEPHONE #:** ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

**EMAIL ADDRESS:** \_\_\_\_\_

**MAILING ADDRESS:** \_\_\_\_\_

**NAME:** \_\_\_\_\_

**CHECK ONE:**  Master Card  Visa

**PLEASE BILL MY CREDIT CARD IN THE AMOUNT OF:** \$ \_\_\_\_\_

**CREDIT CARD #:** \_\_\_\_\_

**CVC # (3 DIGIT # ON BACK OF CARD):** \_\_\_\_\_ **EXPIRATION DATE:** \_\_\_\_\_

**SEND COMPLETED ORDER FORM & CHECK OR CREDIT CARD INFORMATION TO...**

**MAILING ADDRESS:** The Rainbow Project, Inc. - 831 East Washington Avenue; Madison, WI 53703

**FAX:** (608) 255-0457

**QUESTIONS CAN BE DIRECTED TO:** (608) 255-7356, extension 310 OR Info@TheRainbowProject.net

\*Prices & Availability Subject to Change Without Notice. Please allow 4 – 6 weeks for delivery.