



FAR INFRARED HEALTH INC.

Mail Order Form

Date:
 Customer #:

Sold To:

Name: _____

Address: _____

City: _____

State: _____ Zip: _____

Country: _____

Phone: _____ Fax: _____

Email: _____

Ship To:

Name: _____

Address: _____

City: _____

State: _____ Zip: _____

Country: _____

Phone: _____ Fax: _____

Email: _____

Item Code	Model Name	Style	Color	Size	Qty	Price	TOTAL

Shipping Chart/ US Funds	Expedited To: Canada 3-7 biz days	Air Mail To: USA 10-14 biz days	Expedited To: USA 8-10 biz days	Xpresspost To: USA 3-5 biz days	To: Int'l
Order Totals:					
1 Items	\$ 10.95	\$ 4.95	\$13.95	\$21.95	Please contact us for rates
2 Items	\$ 11.95	\$ 6.95	\$14.60	\$22.60	
3-4 Items	\$ 13.95	N/A	\$15.95	\$24.95	
5-10 Items	\$ 17.95	N/A	\$19.95	\$29.95	
More than 10 Items	Please contact us for rates				

Sub Total	<input style="width: 100%; height: 20px;" type="text"/>
Shipping & Handling	<input style="width: 100%; height: 20px;" type="text"/>
TOTAL US Funds	\$ <input style="width: 100%; height: 20px;" type="text"/>

Certified Check
 Money Order
 Bank Draft
 Visa
 MasterCard
 Amex
 Discover

(Sorry, Personal checks can no longer be accepted)

Name on Card:	Card#:
	Card Code: <input style="width: 150px;" type="text"/> Expiry Date: <input style="width: 100px;" type="text"/>

www.farinfraredhealth.com
 E-Mail: inquiry@farinfraredhealth.com
 Checks Payable to: **Far Infrared Health Inc.**
 2620 Regatta Drive, Suite 102, Las Vegas, NV 89128 USA

Shipping Dept.:
 Far Infrared Health Inc.
 2225 - 21331 Gordon Way, Richmond, BC V6W 1J9 Canada
 Call Toll Free: **1-888-327-9663**