

# Merchandise & Publications Order Form

| Item  | Price  | Quantity & Size | Total                           |
|---|--|-----------------|---------------------------------|
| Pashmina with logo  | \$30.00  |                 |                                 |
| Code of Ethics  | 1 to 20 copies are \$5.00 each;<br>21 or more copies are \$2.00 each |                 |                                 |
| ECEBC t-shirts (S, M, L, XL, 2XL)   | \$20.00  |                 |                                 |
| ECEBC green bag   | \$5.00   |                 |                                 |
| Code of Ethics poster   | \$2.00   |                 |                                 |
| Taking Care: A Child Abuse<br>Prevention Manual                                   | \$30.00 (members)<br>\$60.00 (non-members)                           |                 |                                 |
| Let's Talk About Touching (LTAT) Kit<br>(only available to trained practitioners) | \$125.95 (members)<br>\$149.95 (non-members)                         |                 |                                 |
| <b>*Shipping &amp; Handling</b>   |  |                 |                                 |
| <b>Value of Order</b>   | <b>S&amp;H Charge</b>  |                 | <b>Subtotal</b>                 |
| Up to \$40  | \$8  |                 |                                 |
| \$41 to \$100   | \$15   |                 |                                 |
| \$101 to \$150  | \$20   |                 |                                 |
| \$151 to \$200  | \$25   |                 |                                 |
| \$201 to \$250  | \$30   |                 |                                 |
| For orders of \$250 or more,<br>please contact the ECEBC office.                  |  |                 | <b>Shipping &amp; Handling*</b> |
|   |  |                 | <b>TOTAL ORDER</b>              |

#10727 2791 RR0001

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City                      Prov                      Postal Code

\_\_\_\_\_  
Daytime Phone Number

\_\_\_\_\_  
Signature

**Method of Payment:**

Cheque     Visa     MasterCard

Card No. \_\_\_\_\_ Expiry \_\_\_\_\_

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

Please return form to: ECEBC, 309 – 515 West Pender Street, Vancouver, BC  
V6B 1V5  
Phone: 604.709.6063 or 1.800.797.5602 Fax: 604.709.6077 Email: [hhazel@ecebc.ca](mailto:hhazel@ecebc.ca)