DELLON SURGICAL DVD SET ORDER FORM

Name: _____

DPM MD OTHER

Credit Card Billing Address:_____

Street **city,** **state, zip**

_____

Mailing Address (if different) : _____

Email: _____ **Phone:** _____

DESCRIPTION	***AMOUNT***
DELLON SURGICAL DVD SET ORDER FORM	$525.00 (includes shipping and handling

Payment Method:

Check: **(Payable to)** **Association of Extremity Nerve Surgeons / ENRF**

Credit Card: **(Circle One)** **Visa** **Mastercard** **American Express**

Account #: _____ **TOTAL Enclosed:**

Exp. Date: _____ $_____

Signature: _____

Date: _____

*Payment due upon receipt

Reference: AENS 2011 Onsite Registration : Member- $695; Non Member- $895; Guest- $99
Dellon Institute DVDs: $500 ** 50% proceeds donated to AENS
AENS Dues: Active- $295; Associate- $245 ; Student/Resident- $75

Thank You!

The AENS operates as a 501C6 non profit entity under the IRS 26-4077396 and the ENRF operates as a 501C3 non profit entity under the IRS #27-3310690. Donations are subject to tax deductibility, but please verify with a tax professional.

Association of Extremity Nerve Surgeons & The Extremity Nerve Research Foundation
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