

MJD Spa 3-Fold Procedure Brochures

Order Form

MJD Patient Communications • 7910 Woodmont Avenue, Suite 1105 • Bethesda, MD 20814 • Phone 301-657-8010 • Fax 301-657-8023

Each package contains 50 brochures. Minimum order 8 assorted packs.
We offer back panel typesetting for \$60.00. We keep your back panel in our files for *free imprinting* on all orders!

- 8 - 19 packs: \$49.50 per pack / 99¢ per brochure
- 11 - 39 packs: \$44.50 per pack / 89¢ per brochure
- 40 - 59 packs: \$39.50 per pack / 79¢ per brochure
- 60 - 99 packs: \$34.50 per pack / 69¢ per brochure
- 100+ packs: call for pricing

Packs Brochure Title

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_____ Acne/Acne Scars

_____ Mesotherapy

_____ Botox® Cosmetic

_____ Micro-Dermabrasion

_____ Breast Augmentation

_____ Nose Surgery - *Rhinoplasty*

_____ Browlift

_____ PDT/PhotoDynamic Therapy

_____ Cellulite Treatments

_____ Photo Rejuvenation

_____ Chemical Peels

_____ Restylane®

_____ Eyelid Surgery

_____ Sclerotherapy

_____ Facelift

_____ Spot Removal

_____ Facial Vein Treatments

_____ Tattoo Removal

_____ IPL PhotoFacial Rejuvenation

_____ Threadlift™

_____ Laser Hair Removal

_____ Tummy Tuck

_____ Liposuction

TERMS:

- All orders are prepaid: AMX, Visa, MC, or by check.
- Allow 10 days after typeset approval for delivery by ground shipping.
- No changes will be made once order has gone to production.
- No refunds or exchanges.

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Credit Card #: _____ Exp. Date: _____ Code #: _____ Use this card for future orders? Yes No

Name on Credit Card: _____ Authorization Signature: X _____

_____ Total Brochure Packages at \$ _____ per pack \$ _____

First order set-up fees: \$60.00 typeset including photo, map or logo \$ _____

Other: _____ \$ _____

ORDER HERE

Add Shipping & Handling \$ _____
(8% Regular UPS Ground, 13% 2nd Day Air, 22% Overnight, 23% plus International)

Maryland Offices: Please add 6% Sales Tax \$ _____

TOTAL COST \$ _____

Any changes to your brochure back? CK ONE:

Yes _____, No _____, Fold only _____

Name: _____ Practice: _____ Specialty: _____

Shipping Address: _____ Email: _____

City, State, Zip Code: _____ Website: _____

Phone: _____ Fax: _____ Today's Date: _____ Check Enclosed? _____