

# X-STRAP® SYSTEMS U.S.A. ORDER FORM

Send us your completed order form with check or money order made out to: **X-STRAP SYSTEMS.**

Check here if you want brochures:

Do not send cash. No C.O.D. orders.

<b>Send orders to:</b>	<b>X-STRAP SYSTEMS</b> 9 Stonegate Drive Hyde Park, NY 12538	<b>CREDIT/DEBIT CARD ORDERS</b> 1) Processed at our website: <a href="http://www.x-strap.com">www.x-strap.com</a> 2) Processed at our eBay store: <a href="http://stores.ebay.com/x-strap-solutions">http://stores.ebay.com/x-strap-solutions</a> . 3) Call us at 845-233-4713 (USA)
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ITEM	QUANTITY ORDERED	TOTAL UNITS ORDERED (All Colors)	PRICE PER UNIT	TOTAL \$ (Total Units X Price)
<b>DORSI-LITE™ FOOT SPLINT</b> <input type="checkbox"/> Adult Size <input type="checkbox"/> Child Size	BLACK		\$60	\$
4-Piece Replacement Fabric Components for Adult	BLACK		\$30	\$
2-Piece Replacement Fabric Components for Adult	BLACK		\$18	\$
3-Piece Replacement Fabric Components for Child	BLACK		\$25	\$
Plastic Spine <input type="checkbox"/> Adult Size <input type="checkbox"/> Child Size	BLACK		\$30	\$
<b>DORSI-STRAP™ for Footdrop</b>	WHITE BLACK BROWN		\$42	\$
2-Piece Set Additional/Replacement Straps for <b>DORSI-STRAP™</b>			\$17	\$
<b>DORSI-STRAP™ PRO</b> Heavy-Duty Footdrop Support			\$45	\$
2-Piece Set Additional/Replacement Straps for <b>DORSI-STRAP™ PRO</b>			\$20	\$
Addl. Cuff for <b>DORSI-STRAP™</b> and <b>DORSI-STRAP™ PRO</b>			\$25	\$
<b>DYNAMIC-ARM-SLING™</b> Arm/Shoulder Orthosis	BLACK		\$36	\$

<input type="checkbox"/> Check here if this is your first X-Strap order	<b>Merchandise Total</b>	\$
	<b>Discount Code</b> _____ <b>Deduct Discount &gt;&gt;&gt;</b>	- \$
<b>C H O O S E</b>	<input type="checkbox"/> <b>Standard Shipping and Handling - \$7.00</b> <small>Orders with incorrect Shipping will be returned unfilled.</small>	\$
<input type="checkbox"/> Check if OK to leave Express order by door	<input type="checkbox"/> <b>EXPRESS SHIPPING - \$30.00</b>	
	<b>ORDER TOTAL Pay this amount &gt;&gt;&gt;&gt;&gt;&gt;&gt;</b>	\$

**SHIP TO:** ALL YOUR PERSONAL INFORMATION IS KEPT IN-HOUSE AND STRICTLY CONFIDENTIAL. 03-20

Name		
Address		
City	State	Zip

**ORDERED BY:**

Name		
Address		
City	State	Zip

**CONDITION(S) YOU ARE TREATING**

FOOT DROP

PLANTAR FASCIITIS

ACHILLES TENDONITIS

SHIN SPLINTS

HEEL SPURS

ARM / SHOULDER

**SHIPPING INFORMATION**

Orders paid by money order are shipped immediately via First Class mail or Priority with Tracking, or optionally, via USPS EXPRESS MAIL.

Orders paid by check are shipped as requested, when the check has cleared.

**IN CASE WE HAVE QUESTIONS**

TELEPHONE:	E-MAIL:
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