



**O.R. KIDZONE, LLC.**  
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“Promoting A Positive Perioperative Experience”

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Web Site: [www.orkidzone.com](http://www.orkidzone.com)  
Contact: Mignon Marie Perry, R.N.

## ORDER INFORMATION

DATE: \_\_\_\_\_  
CUSTOMER NAME: \*Individual Orders \_\_\_\_\_  
INSTITUTION: \*Business Orders \_\_\_\_\_  
\*CONTACT: \_\_\_\_\_ \*PHONE #: \_\_\_\_\_  
\*FAX #: \_\_\_\_\_ \*E-MAIL: \_\_\_\_\_  
\*Omit information if credit application has been completed and account established.

PURCHASE ORDER NUMBER: (If Available) \_\_\_\_\_  
ACCOUNT NUMBER: (If Available) \_\_\_\_\_

### ITEM #1-2006

**“Look At Me I Had Surgery” A Child’s Personalized Guide Through the Perioperative Process**  
**COST: \$1.99**

(Minimum Business Order: 25)

**Bulk Orders: 1-99 @ \$1.99 100-499 @ \$1.89 500-999 @ \$1.79**

\*plus tax and shipping/handling charges  
**\*price includes 4-piece crayon set per book**

### ITEM #2-2006

#### **Certificate of Bravery**

“A souvenir that will embrace the child’s courage and perioperative experience”  
**COST: \$0.55/Ea.**

(Minimum Business Order: 25)

**Bulk Orders: 1-99 @ \$0.55 100-499 @ \$0.50 500-999 @ \$0.45**

\*plus tax and shipping/handling charges

#### **Business Orders:**

\*First time orders complete attached credit application and fax or e-mail to above number. Please clarify in the designated space if your institution is tax exempt and provide appropriate verification documentation. Order will be shipped upon approved credit. Allow 10 working days for receipt of purchase. An account number will be issued as a reference for future orders. \*Terms Net 20 with approved credit.

\*Confirmation of order will be either faxed/phoned/e-mailed upon receipt to designated contact.

*“Thank you for your order and the opportunity to share in the education of your pediatric patients to the perioperative process.”*  
Mignon Marie Perry, R.N.