



ORDER FORM

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How did you hear about Smiles For Seniors? _____

What populations do you serve?

- Homebound
- Home health agencies / professionals
- Caregivers senior centers
- Assisted living
- Other *(please explain)* _____

How do you plan to implement Smiles For Seniors into your program? _____

What format would you like to order the Smiles For Seniors program in? CD-ROM VIDEO & BINDER

There is a \$10 shipping and handling charge; the program itself is free. For larger orders, please call for specific shipping costs.

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Please bill my credit card. **Please note if billing address is different from shipping address:**

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