



FOR PROFIT ORGANIZATION
ORDER FORM

NAME: _____

COMPANY: _____

ADDRESS: _____

CITY: _____

PROVINCE: _____

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PHONE: _____

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Bridging the Gap DVD and Manual \$500.00 + HST(13%) \$65.00

METHOD OF PAYMENT:

Cheque **Please make payable to: City of Kitchener**

Visa # _____ expiry date: _____

Mastercard # _____ expiry date: _____

Please return form to:
The Peer Helper Co-ordinator
Rockway Centre
1405 King Street East
Kitchener Ontario N2G 2N9
(519) 741-2576