

# CABRILLO COLLEGE NURSING SKILLS LAB KIT ORDER FORM

The purchase of a skills kit is **REQUIRED** for your course. The contents of the **COMPLETE KIT is \$170.00.** (This price includes shipping). To have supplies available for the first lab, **YOUR ORDER MUST BE RECEIVED NO LATER THAN 4:00 PM EASTERN TIME ON December 4<sup>th</sup>, 2009.**

To ensure timely delivery, THE KITS WILL BE SENT TO YOUR INSTRUCTOR and dispensed after proof of purchase from G.T.S., INC. **KITS WILL SHIP DIRECTLY TO THE SCHOOL.**

**ANY KITS REQUESTED AFTER 4:00 PM EST ON December 4<sup>th</sup>, 2009** will require an additional \$10.00 SHIPPING / LATE FEE FOR A TOTAL OF \$180.00. Please allow 72 HOURS to process your order. **NO PHONE VERIFICATIONS WILL BE GIVEN.**

## WAYS TO ORDER

### **Order by mail: (receipt requires self addressed, stamped envelope)**

Please return **THIS ENTIRE ORDER FORM** with a MONEY ORDER or CREDIT CARD INFORMATION (NO PERSONAL CHECKS WILL BE ACCEPTED).

SEND TO: **GRACE TRAINING SUPPLY, INC**  
400 W. OAK RIDGE RD.  
ORLANDO, FL. 32809

**Order online: [www.gracetrainingsupply.com](http://www.gracetrainingsupply.com)** AUTO REPLY WILL BE SENT-(\$20.00 CHARGEBACK FEE FOR DENIED CHARGES). **TO ACCESS ORDERING OPTION ONLINE, YOU MUST USE THE FOLLOWING INFORMATION:**

**USERNAME: CBCCOM / PASSWORD: 102304**

**Order by fax: 407-856-1788** receipt by e-mail, (preferred) \_\_\_\_\_ Or phone \_\_\_\_\_

**NO PHONE ORDERS WILL BE ACCEPTED**

PLEASE PROVIDE THE FOLLOWING INFORMATION:

SCHOOL NAME \_\_\_\_\_

STUDENT NAME: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

SOCIAL SECURITY LAST 4 DIGITS \_\_\_\_\_

CREDIT CARD #: (Front of card) \_\_\_\_\_

EXPIRATION DATE: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

CREDIT CARD **HOLDER** BILLING INFORMATION

CHECK CARD TYPE:

NAME \_\_\_\_\_

VISA  
MASTERCARD  
DISCOVER

STREET \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

C.C **HOLDER** SIGNATURE \_\_\_\_\_