



DVD ORDER FORM

SafeChurch DVD: Movement Building to End Child Sexual Abuse

Name:
Church or Organization:
Address:
City, State, Zip:
Telephone:
Email:
Tax-exempt organization?
Ship to the above address?
Ship to the following address:

Table with pricing information: Price, Volume Discount, and shipping & handling costs.

Number of DVDs: Total Payment (including shipping):

Return this completed form with check or credit card information and tax exempt certificate (if applicable) to:

Samaritan Counseling Center
Attn: SafeChurch Program
1803 Oregon Pike
Lancaster, PA 17601

Credit Card Information section with fields for Name on card, Billing address, City, State, Zip, Credit Card Number, Exp. Date, Total to be Charged, Type, Signature, and Date.