

# ONTARIO MULTIFAITH COUNCIL ON SPIRITUAL AND RELIGIOUS CARE

## ORDER FORM



789 Don Mills Road, Suite 208, Toronto, ON M3C 1T5 Tel: 416-422-1490, Fax: 416-422-4359 email: [Sales@omc.ca](mailto:Sales@omc.ca)

Individual Items	A. Item Cost	B. Quantity Ordered	C. Shipping one in ONTARIO *	D. Sub Total	E. For each Additional item add ( ) per item
Multifaith Information Manual 5 <sup>th</sup> edition - English	\$26.95		\$5.00		\$2.00
Multifaith Information Manual 5 <sup>th</sup> edition - French	\$ 32.95		\$5.00		\$2.00
Multifaith Information Manual 4 <sup>th</sup> edition - English	\$ 10.00		\$5.00		\$2.00
The Golden Rule Poster	\$ 9.95		\$6.50		1.00

To total the cost of the order add A x B + C = D (sub total) To calculate the shipping for each additional item add (E) multiplied by the number ordered to arrive at the TOTAL cost. OR Simply contact us for an accurate quotes on purchases and shipping.

**Please Note:**  
Charges to ship orders out of province, and orders that exceed (5) items , will be adjusted to reflect actual shipping costs, Please feel free to contact us for a quote at [Sales@omc.ca](mailto:Sales@omc.ca)

	<b>TOTAL Canadian Funds</b>
	Large Order Shipping

<input type="checkbox"/> I am enclosing a cheque/money order payable to the "Ontario Multifaith Council"  <input type="checkbox"/> I have included a purchase order number and agree to pay in the term specified on the invoice that will accompany the order. <i>Purchase order number</i> _____	Please Complete the following if paying by <input type="checkbox"/> Visa or <input type="checkbox"/> MasterCard.  Card Number: _____ Expiry Date: _____  _____ _____ _____ (Print name as it appears on the card) <span style="float: right;">Signature _____</span>
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Ship to Name: _____	Organization: _____	
Address: _____	City: _____	Prov: _____
Postal code: _____	Telephone: _____	Email: _____