



ORDER FORM

Date: _____

SHIPPING INFORMATION

Facility/Hospital Name: _____
 Shipping Contact Name: _____
 Date of Surgery (MM/DD/YY): _____ Product Arrival Date (MM/DD/YY): _____
 Shipping Address: _____
 City: _____ Province: _____ Postal Code: _____
 E-mail: _____ Phone: _____ Fax: _____

BILLING INFORMATION

Facility/Hospital Name: _____
 Billing Contact Name: _____
 Billing Address: _____
 City: _____ Province: _____ Postal Code: _____
 E-mail: _____ Phone: _____ Fax: _____

ORDER INFORMATION

ITEM #	DESCRIPTION	QUANTITY
EAS-90010	Aurora Single Layer 10mm Amnion Disc	
EAS-90012	Aurora Single Layer 12mm Amnion Disc	
EAD-90010	Aurora Dual Layer 10mm Amnion Disc	
EAD-90012	Aurora Dual Layer 12mm Amnion Disc	
EV-0-90005	Eclipse Plus 5mm Single Layer Amnion Disc	
EV-0-90008	Eclipse Plus 8mm Single Layer Amnion Disc	
EV-0-90010	Eclipse Plus 10mm Single Layer Amnion Disc	
EV-0-90012	Eclipse Plus 12mm Single Layer Amnion Disc	
EV-0-90014	Eclipse Plus 14mm Single Layer Amnion Disc	
EV-0-90016	Eclipse Plus 16mm Single Layer Amnion Disc	
EV-0-73011	Tetra Plus 1X1 cm Single Layer Amnion Surgical Patch	
EV-0-73012	Tetra Plus 1X2 cm Single Layer Amnion Surgical Patch	
EV-0-73013	Tetra Plus 2X2 cm Single Layer Amnion Surgical Patch	

ECLIPSE DISCS IN DUAL LAYER AVAILABLE UPON REQUEST -
 PLEASE CALL FOR MORE INFORMATION

Aurora Total QTY	
Eclipse Total QTY	
Tetra Total QTY	
TOTAL QUANTITY	

SHIPPING & HANDLING OPTIONS*:

Shipping costs may vary and may be subject to duties.
 Our representatives will confirm before purchase.

*Please select one of the above shipping options. Ophthalmogix Canada will not be responsible for delays due to carrier delivery.

PAYMENT INFORMATION

WOULD YOU LIKE A PRICE ESTIMATE PRIOR TO PURCHASE INVOICE ? **YES** **NO**

PURCHASE OPTIONS : **ACH BANK TRANSFER** **CREDIT CARD** **CHEQUE**

REP INFORMATION

Distributor/Representative Name: _____ Sub-Rep Name: _____

Contact Information: _____

Notes: _____

ORDERING AND PAYMENT INFORMATION

Payment directed to Ophthalmogix Canada Inc in Hamilton, ON | Phone: 866-982-1511

Email: ophthalmogixcanadaorder@gmail.com | www.ophthalmogix.com

Health Access Certificate 100274