

PODIACARE LTD

Prestigious Letterheads and Business Cards for your practice



Podiacare Ltd is proud to offer its services to supply letterheads, business cards, and appointment reminder cards for your practice. In partnership with Michael Burbridge Limited, we have created a new design which is printed in full colour and has a fresh, contemporary look. Printed to a high standard using quality materials and offering an impressive identity for your practice.

We also offer a black and white series produced to the same high standard and available in the same quantities. Please see the table in our brochure for our current quantities and prices.

Order Form

Please print clearly using block capitals

Product no	Description	Quantity colour	Quantity B&W	Price
Example: A1775	Foot Health Professional Series business cards	500		122.00
Postage				£3.50
SUBTOTAL				
17.5% VAT				
GRAND TOTAL				

Payment Details






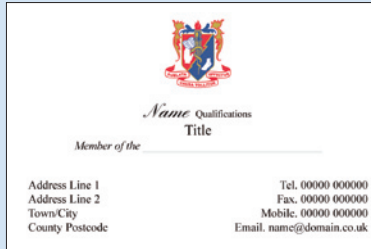





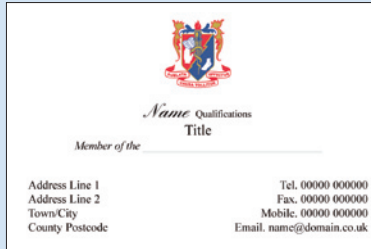





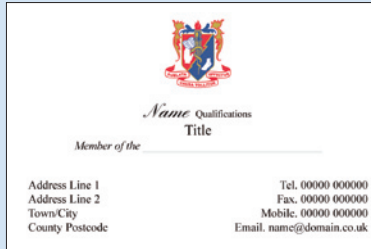
Please send this completed form to **Podiacare Limited, 149 Bath Road, Maidenhead, Berkshire SL6 4LA** or fax it to **01628 674483**. Orders cannot be accepted over the telephone. Please allow 14 working days for delivery. Thank you.

Please enter all information in BLOCK CAPITALS								
Please tick as appropriate:								
<input type="checkbox"/> I enclose a cheque for £ _____ made payable to Podiacare Limited.								
<input type="checkbox"/> Please debit my (delete as appropriate) Switch / Visa / Mastercard / Delta / Solo for the amount of £ _____								
Name (on card): _____					Membership no: _____			
Account no: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>						Security no. on back of card last 3 digits. <input type="text"/> <input type="text"/> <input type="text"/>		
Expiry date: _____			Valid from date: _____			Switch Issue no: _____		
Signature: _____					Date: _____			
Thank you for your order								

Your Details

PLEASE USE BLOCK CAPITALS

To prevent misunderstandings and avoid possible delays when ordering letterheads or business cards, would you please ensure that you **print CLEARLY (in block capitals) the exact details you wish to appear on your chosen stationery.**

Please enter all information in BLOCK CAPITALS		SMAE Membership No.	<input type="text"/>						
Name:		Qualifications:							
Title: (i.e. Chiropodist, Physiotherapist, etc.)									
Are you HPC Registered? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please enter HPC Registration No. _____									
Please tick one: <input type="checkbox"/> Visiting practice <input type="checkbox"/> Surgery by appointment <input type="checkbox"/> Surgery & Visiting practice or any other concise wording to be included to describe your practice, or leave blank for no inclusion (26 letters max): _____									
Address:									
		Post Code							
Telephone:		Fax:							
Mobile:		Email:							
Please indicate your chosen design.									
<table border="0"> <tr> <td style="width: 33%; vertical-align: top;">  <p><input type="checkbox"/> Series 1: Foot Health Professional <i>Suitable for all foot health professionals (full colour)</i></p> </td> <td style="width: 33%; vertical-align: top;">  <p><input type="checkbox"/> Series 2: Sports Therapy <i>Suitable for Sports Therapists (full colour)</i></p> </td> <td style="width: 33%; vertical-align: top;">  <p><input type="checkbox"/> Series 1 and 2: Deluxe B&W <i>Suitable for Chiropodists, Podiatrists, Foot Health Professionals, Sports Therapists and Physiotherapists (B&W)</i></p> </td> </tr> <tr> <td style="width: 33%; vertical-align: top;">  <p><input type="checkbox"/> Series 1: Chiropody/Podiatry <i>Suitable for Chiropodists and Podiatrists (full colour)</i></p> </td> <td style="width: 33%; vertical-align: top;">  <p><input type="checkbox"/> Series 2: Physiotherapy <i>Suitable for Physiotherapists (full colour)</i></p> </td> <td style="width: 33%; vertical-align: top;">  <p><input type="checkbox"/> Series 1 and 2: Traditional <i>Suitable for Chiropodists, Podiatrists, Foot Health Professionals, Sports Therapists and Physiotherapists</i> Colour logo <input type="checkbox"/> B&W logo <input type="checkbox"/></p> </td> </tr> </table>				 <p><input type="checkbox"/> Series 1: Foot Health Professional <i>Suitable for all foot health professionals (full colour)</i></p>	 <p><input type="checkbox"/> Series 2: Sports Therapy <i>Suitable for Sports Therapists (full colour)</i></p>	 <p><input type="checkbox"/> Series 1 and 2: Deluxe B&W <i>Suitable for Chiropodists, Podiatrists, Foot Health Professionals, Sports Therapists and Physiotherapists (B&W)</i></p>	 <p><input type="checkbox"/> Series 1: Chiropody/Podiatry <i>Suitable for Chiropodists and Podiatrists (full colour)</i></p>	 <p><input type="checkbox"/> Series 2: Physiotherapy <i>Suitable for Physiotherapists (full colour)</i></p>	 <p><input type="checkbox"/> Series 1 and 2: Traditional <i>Suitable for Chiropodists, Podiatrists, Foot Health Professionals, Sports Therapists and Physiotherapists</i> Colour logo <input type="checkbox"/> B&W logo <input type="checkbox"/></p>
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Do you require Appointment Schedulers printed on the reverse of your business cards? <input type="checkbox"/> Yes <input type="checkbox"/> No									

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