

# QUADRATESTP<sup>®</sup> SYSTEM

## ORDER FORM FOR MEDICAL PROFESSIONALS ONLY

SALES REP _____	CUSTOMER # _____	DATE _____
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Orders may be phoned or faxed to: Tel **877.792.4669** Fax **(203) 758-1011**

Office Name: \_\_\_\_\_ Phone (    ) \_\_\_\_\_  
 Type of Practice: \_\_\_\_\_ Fax (    ) \_\_\_\_\_  
 Contact Name: \_\_\_\_\_ PO# \_\_\_\_\_

**Ship To:**

Name: \_\_\_\_\_ Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Bill To: (if different)**

Name: \_\_\_\_\_ Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Credit card address: (if different) Invoice \_\_\_\_\_**

Name: \_\_\_\_\_ Street or P.O. # \_\_\_\_\_ Zip \_\_\_\_\_  
 Account # \_\_\_\_\_ Exp \_\_\_\_\_ CCV\* \_\_\_\_\_ MC \_\_\_\_\_ Visa \_\_\_\_\_ Disc \_\_\_\_\_

\*CCV security code is the last 3 digits on the back of your credit card in the signature box

**www.thequadrastepssystem.com**

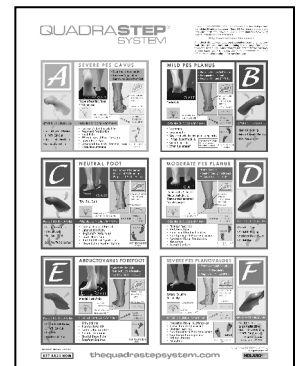
**INDIVIDUAL PAIRS** (please enter number of pairs on line)

**QUADRATESTP is Going Green!** Please let us know whether you would like your orthotics with or without packaging.  **With bag**  **Without bag** (break-in instructions are still included)

<b>A Quad</b>	Regular	Narrowed*	<b>B Quad</b>	Regular	Narrowed*
Size 1	_____	_____	Size 1	_____	_____
Size 2	_____	_____	Size 2	_____	_____
Size 3	_____	_____	Size 3	_____	_____
Size 4	_____	_____	Size 4	_____	_____
Size 5	_____	_____	Size 5	_____	_____
<b>C Quad</b>	Regular	Narrowed*	<b>D Quad</b>	Regular	Narrowed*
Size 1	_____	_____	Size 1	_____	_____
Size 2	_____	_____	Size 2	_____	_____
Size 3	_____	_____	Size 3	_____	_____
Size 4	_____	_____	Size 4	_____	_____
Size 5	_____	_____	Size 5	_____	_____
<b>E Quad</b>	Regular	Narrowed*	<b>F Quad</b>	Regular	Narrowed*
Size 1	_____	_____	Size 1	_____	_____
Size 2	_____	_____	Size 2	_____	_____
Size 3	_____	_____	Size 3	_____	_____
Size 4	_____	_____	Size 4	_____	_____
Size 5	_____	_____	Size 5	_____	_____

\* 1/4" narrower grind for casual shoes and cleats. No extra charge.

**POSTER**



6 Quad Assessment Model Poster  
 \_\_\_\_\_ Total Posters

Return Policy: Items may be returned for future credit unused and undamaged in original packaging within 30 days of purchase with copy of original receipt. 25% re-stocking fee may apply.

**SPECIAL INSTRUCTIONS**

Topcovers are available at a cost of \$25 a pair, other adjustments such as met mounds, heel cushions and heel lifts are available for an additional \$10 a pair. Please indicate adjustments here:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

<b>SIZING</b>	<b>Size #</b>	<b>Women</b>	<b>Men</b>	<b>Euro</b>
	Size 1	6.5 - 7.5	5 - 6	37 - 38
	Size 2	8 - 9	6.5 - 7.5	39 - 40
	Size 3	9.5 - 10.5	8 - 9	41 - 42
	Size 4	11 - 12	9.5 - 10.5	43 - 44
	Size 5	12.5 - 13	11 - 12	45 - 46

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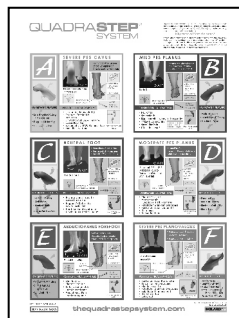
**www.thequadrastepssystem.com**

## 30 PAIR STARTER KIT - BEST DEAL!!

Everything you need to start dispensing  
**QUADRASTEP®** Orthotics to your patients  
**TODAY!**

- 30 pairs (all sizes and Quads)
- 5 Drawer Storage Cart
- Educational Poster
- Marketing Material
- FREE Training Webinar

**Includes 19" x 27" Educational Poster**



\_\_\_ Kits    \_\_\_ Regular Width Orthotics    \_\_\_ Narrow Width\* Orthotics

\* 1/4" narrower grind for casual shoes and cleats. No extra charge.

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