



## HOSA Order Form

Indicate quantity in groups of 25

\_\_\_\_\_ PINS- \$2 each  
\_\_\_\_\_ PAPER PUZZLE PIECES(100/pack)- free  
\_\_\_\_\_ BROCHURES- free  
\_\_\_\_\_ POSTERS- free

All pin orders have a flat shipping rate of \$5,  
please add this to all pin orders.

### Payment info:

Check: # \_\_\_\_\_ make checks payable to Autism Speaks

Credit Card:       AmEx       Visa       Mastercard       Discover

Name on the Card: \_\_\_\_\_

Card Number: \_\_\_\_\_

SID: \_\_\_\_\_ AmEx on front (4digits) for all other 3 digits on the signature line

Expiration Date: \_\_\_\_\_ / \_\_\_\_\_

Signature: \_\_\_\_\_

Please email the completed order form to [hosa@autismspeaks.org](mailto:hosa@autismspeaks.org)  
Or mail to  
Autism Speaks  
109 Ambersweet Way #320  
Davenport, FL 33897  
(863)852-8011

Call Lara Collazo if you have any questions (863) 852-8011