**THROMBOSIS CANADA AWARENESS MATERIALS ORDER FORM**

Please complete this form indicating the quantity of each and e-mail to info@thrombosiscanada.ca

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| Name: | | | | | |
| Position: | | | | | |
| Institution/Clinic: | | | | | |
| Delivery address: | | | | | |
|  | | | | | |
| City: | | Province: | | Postal Code: | |
| Phone: | | | | | |
| Contact e-mail: | | | | | |
|  | | | | | |
| **ITEM NUMBER** | **SIZE** | | **QUANTITY** | | **LANGUAGE (ENGLISH/FRENCH)** |
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Thank you for your interest in our materials.

Costs for these materials are covered through sponsorship and donations.

To help prevent illness and death due to thrombosis, donate today at

[www.thrombosisCanada.ca/DONATE](http://www.thrombosisCanada.ca/DONATE).