

Green Cross Remedies
P.O. Box 35094
Unit 409-15940 Fraser Highway, Surrey B.C. Canada V3W 4G1
www.greencrossremedies.com

Order Form

Ship to Address:

Name: _____ Contact _____ Date _____

Address: _____

Address: _____

City _____ St _____ Zip _____

Phone _____ Fax _____ Email: _____

Credit Card Information:

Name as it appears on Card: _____

Credit Card #: _____

Expiration Date: _____ VISA _____ MASTERCARD _____

(Billing on your statement may appear as Green Cross Remedies)

Billing address on credit card if different then ship to address:

Name: _____

Address: _____

City _____ State _____ Zip _____

Product	Size	Quantity	Price –USD	Total

- **With all orders: Include a prescription made out to your clinic or doctors office with the words “*For Clinic Use*” or “*For Office Use*” written on it.**
- **Fax this form with prescription to 1-866-520-6941**
- **Or E-mail this form to orders@greencrossremedies.com**