



www.aosafetysrx.com

Order Date (mm/dd/yy)

Prescription Eyewear - Order Form

1728 West Frisco 401 East Jefferson
Chickasha, OK 73018 Plymouth, IN 46563

Tel: 800.982.2828

Fax: 800.945.2828

INSTRUCTIONS TO EYE CARE PROFESSIONAL (Dispenser)

The right side of this form guides you based on the options allowed by this program.

Enter upgrade amounts in the blank box for additional upgrades and record the grand total in the box for the credit card amount.

TELEPHONE (Required)

PATIENT LAST NAME (Required)

PATIENT FIRST NAME (Required)

Company: **00005000** This area for AOSafety use only

For Credit Card Purchases ONLY

ECP (Eye Care Professional):
Please enter your AOSafety account number in the box below, followed by your SHIP-TO address.

This information is essential for the prompt payment of your dispensing fee.

Account-No:

Ship-To Address:

INSTRUCTIONS TO CARDHOLDER

Tints and lens materials are allowed unless you indicate otherwise.

For options other than the base packages, simply indicate Y (Y, allowed) or N (Not Allowed) as you deem appropriate for your eyewear program.

This order form is for complete pairs of glasses only - no lenses only.

All Prices are in US Dollars.
Single Vision, BiFocal, TriFocal Base Progressive (PAL) **\$125.00**

Lenses

Single Vision, Bifocals, Trifocals and Progressive Addition Lenses.
PALS included are AO Truvision, AO Pro Sola Visuality, SolaMax and VE Outlook, Sola XL, VIP

Frames

All AOSafety brand frames.
Other frame upgrade options below.

Y N (Y=Yes, allowed / N=Not Allowed)
If left blank, default will be YES

Tints & Coatings

Tints
 SRC (Scratch Resistant Coating)
 UV (Ultraviolet Coating)

Material

Glass
 Plastic CR-39
 Polycarbonate

SideShields

Detachable (default)
 Permanent

Do not fax without credit card information.

The total credit card amount does NOT include applicable state or county tax.

Credit Card Type (VI, MC, DI, AX) CC Amount

Credit Card No CC Exp (mm/yy)

* Signature required for Credit Card charges (lower right section of form)

Lens Style	<input type="checkbox"/> Single Vision	Progressives (No Other PALs Authorized)			
	<input type="checkbox"/> BiFocal <input type="checkbox"/> 28 <input type="checkbox"/> 35	<input type="checkbox"/> AO TruVision	<input type="checkbox"/> AO b'Active		
	<input type="checkbox"/> TriFocal <input type="checkbox"/> 28 <input type="checkbox"/> 35	<input type="checkbox"/> AO Pro	<input type="checkbox"/> Sola Visuality		
	<input type="checkbox"/> Occupational 14 mm sep <input type="checkbox"/> 28 <input type="checkbox"/> 35	<input type="checkbox"/> AO Easy	<input type="checkbox"/> AO Compact		
	<input type="checkbox"/> Outlook	<input type="checkbox"/> Sola MAX			

Duty to warn: Polycarbonate is the most impact resistant material available & is highly recommended

Polycarbonate Plastic CR-39 Glass Other

Lens Material	Tints & Coatings			
	<input type="checkbox"/> Clear	<input type="checkbox"/> Polarized	<input type="checkbox"/> Intimidator	
	<input type="checkbox"/> Tint <input type="text"/>	<input type="checkbox"/> Scratch Resistant Coating	<input type="checkbox"/> DX Rx Anti-Fog	
	<input type="checkbox"/> Photochromic	<input type="checkbox"/> UV		
	<input type="checkbox"/> Transitions	<input type="checkbox"/> SuperCote AR		

PROGRESSIVES (PALS) \$50.00

AO Compact, AO Easy, AO b'Active, Comfort, Sola One
Note: No other PAL brands may be ordered in this program.

FRAME UPGRADE \$75.00

Y N (Y=Yes, allowed / N=Not allowed)
 All Titmus, OnGuard & Hudson

OTHER LENS OPTIONS \$65.00 Each

Y N (Y=Yes, allowed / N=Not allowed)
 Intimidator Check box to order item & then add \$50 for each item to total. lens options below.
 DX Rx Anti-Fog
 SuperCote AR
 Polarized
 Transitions/Photochromic

Total Lens Options

Prescription		Sphere	Cylinder	Axis	Prism	Base
	Right OD	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Left OS	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		Add Power	Seg Hgt	Dist PD	Near PD	
Right OD	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>		
Left OS	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>		

Base Package (\$125)
Progressive Upgrade
Frame Upgrade
Other Lens Options
Shipping & Handling **\$5.00**

TOTAL PRICE Enter here and in credit card section (left side of form)

*** Credit Card Authorization**
Signature

Dispensing Fee Will Be Paid By AOSafety

Retain a copy of this form or the shipping document as your credit card receipt.

Doctor / Optician
Phone
Fax
Signature

Frame	Style Name, Model	Eye	Bridge	Color	Temple
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Side Shields Permanent Detachable Gray T-LOC
 * Select Styles Only * Integrated * Perforated * Breeze Catcher

Special Instructions Rush Job **ALL ORDERS MUST BE PD BY CREDIT CARD**