



www.aosafetysrx.com

Prescription Eyewear - Order Form

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Chickasha, OK 73018 Plymouth, IN 46563

Tel: 800-982-2828
Fax: 800-945-2828

Order Date (mm/dd/yy)

Company **00005001** This area for AOSafety use only
For Credit Card Purchases ONLY

TELEPHONE (Required)
PATIENT LAST NAME (Required)
PATIENT FIRST NAME (Required)

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.

Ship-To

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 CCExp mm/yy

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

Lenses Only Patient's Own Frame Frame Only
Lens Style
 Single Vision BiFocal 28 35 TriFocal 28 35 Occupational 14 mm 15 mm 28 35
Progressives
 AO TruVision Sola Visuality AO Pro AO Compact AO Easy AO b'Active Other _____

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

Polycarbonate Plastic CR-39 Glass Other _____

Tint & Coating
 Clear Polarized SuperCote
 Tint _____ Scratch Resistant Coating SuperCote AR
 Photochromic UV Other (Describe Below) _____
 Transitions Anti-Reflective _____

Prescription
Sphere Cylinder Axis Prism Base
Right OD
Left OS
Add Power Seg Hgt Dist PD Near PD
Right OD
Left OS

Frame
Style Name, Model Eye Bridge Color Temple

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**

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.

INSTRUCTIONS TO CARDHOLDER
Tints and lens materials are allowed unless you indicate otherwise.
For options other than BASE PACKAGE 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.
BASE PRICE PACKAGE INCLUDES: **\$99.00**

Lenses
Single Vision, Bifocals, Trifocals and Progressive Addition Lenses.
PALS included are AO Truvision and SOLA Visuality.

Frames
Base Group A,B,C,D,D Plus, and E.
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

PROGRESSIVES (PALS) \$50.00
AO Pro, AO Compact, AO b'Active, AO Easy, AO Technica, SOLA VIP, SOLA XL, SOLA VIPGold, SOLA XLGold, SOLA Access. Note: No other PAL brands can be ordered in this program.

FRAME UPGRADE \$50.00
Y N (Y=Yes, allowed / N=Not allowed)
 Group F, G or G Plus

OTHER LENS OPTIONS \$50.00 Each
Y N (Y=Yes, allowed / N=Not allowed)
 Anti-Reflective (AR) Check box to order an item and then add \$50.00 for each item ordered to TOTAL box below.
 SuperCote
 Transitions
 Photochromic
 Polarized

Total Lens Options

Base Package \$99.00
Progressives
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 as your credit card receipt.

Doctor / Optician
Phone
Fax
Signature