

HIP HIP HOORAY! LOWER MAINLAND
Cookbook Order Form

Name: _____

Address: _____

City/Province: _____ PC: _____

YES! Send me _____ cookbooks
at a cost of \$10.00 + \$2.00 postage (each) = \$ _____

I am enclosing a: *cheque* *money order*

Payable to

Hip Hip Hooray! Lower Mainland

or

Please charge \$ _____ to my credit card:

VISA MasterCard

Card No. _____ Expiry Date _____ / _____

Name on Card _____

Signature _____

Please send this completed form to:

Hip Hip Hooray! Lower Mainland
% UBC Department of Orthopaedics
#3114 – 910 West 10th Avenue
Vancouver, BC V5Z 4E3

or return it by email to:

hhhooray@interchange.ubc.ca