


Grammar Gallery Order Form – K-12 DISTRICT LICENSE

Prices effective through 8/31/18

License Information								New	Renewal
								<input type="checkbox"/>	<input type="checkbox"/>
District Name								Date you want your license to start	
Physical address								Ordered By	
City, State, ZIP								Email	
# of ELL Students in District	1-50	51 – 250	251 – 1,000	1,001 – 5,000	5,001 – 10,000	10,001 – 25,000	25,001+		
UNIT PRICE: Price – 1 YEAR	\$690	\$1,375	\$3,300	\$6,740	\$11,410	\$18,975	Call for pricing information		
Price – 2 YEARS	n/a	\$2,475	\$4,950	\$10,110	\$17,120	\$28,460			

Order Details		
Product	Unit Price	Total
 GRAMMAR GALLERY® <i>The Nation's Premier Web-based Grammar Program</i>		
Sales tax as appropriate (VA only)		
ORDER TOTAL		

NOTE: Transmitted electronically. No original freight, handling, or shipping cost.

Order Authorization		
By signing this order form, I am indicating that I have read the License Agreement and that my district will abide by all the Terms and Conditions contained therein. The License Agreement and Privacy Policy is available at http://www.grammargallery.org/license.html		
Signature	Today's Date	Payment Method <input type="checkbox"/> Check <input type="checkbox"/> Purchase Order <input type="checkbox"/> Mastercard, Visa, or Discover <i>(complete form on the next page)</i>
Print Name/Title	Email	Phone
District Contact Name(s)	Email	Phone

PLEASE MAKE PURCHASE ORDERS OUT TO SG CONSULTING, INC. Fax this completed form to 877.848.0947 or email to info@mygrammargallery.org.

Thank you for your order!



CREDIT CARD AUTHORIZATION FORM

Cardholder Name	
Billing Address	
Credit Card Type	<input type="checkbox"/> Mastercard <input type="checkbox"/> Visa <input type="checkbox"/> Discover
Credit Card Number	
Expiration Date	
Card Identification Number (last three digits on back of card)	
Amount to Charge	

I authorize SG Consulting, Inc. to charge the amount listed above for a license to use Grammar Gallery.

Signature: _____

Date: _____