



Indiana Directory of Support Groups
Order Form

Please complete the following information and return with payment to the address below.

Name: _____

Company: _____

Street Address: _____

City/ State / Zip: _____

Phone: () _____

Email: _____

Quantity: _____ Cost: \$5.00 ea.

Total Due: \$ _____
Make checks payable to:
About Special Kids

Please Return To:
About Special Kids
7275 Shadeland Ave., Suite 1
Indianapolis IN 46250
Attn.: Information Specialist

Office Use Only:
Received: _____ Check No. _____ Order Completed: _____