

2017 Seva Calendar Order Form



Each **Seva Calendar** is \$20 plus \$5 for envelope and shipping.
Send completed form with check made out to *Sage Integrative Medicine*.
Write "2017 Seva Calendar" in the memo field on your check.
Mail to:

Sage Integrative Medicine

92 Portsmouth Ave, Suite 10
Exeter, New Hampshire 03833

| | |
|--------------------------|--|
| Ship Calendar to: | |
| Name | |
| Address | |
| City | |
| State | |
| Zipcode | |
| Phone Number | |

Circle the number of Seva calendars you want to order.
Please make out check in the amount indicated.

| Number of Calendars | Cost |
|----------------------------|-------------|
| 1 | \$25 |
| 2 | \$50 |
| 3 | \$75 |
| 4 | \$100 |

Thank you for ordering the **2017 Seva Calendar**.
Your donation will go to a good cause.

*Your friends at **Sage Integrative Medicine**.*