

Relief & Wellness News Order Form (Issue 1742, Summer 2010, available for order until 8/31/2010)

Practice Information:

Doctor's Name: _____ Practice Name: _____
 Street Address: _____ City: _____ State: _____ Zip: _____
 Office Telephone: _____ Office Fax: _____
 Email Address: _____ Check here if you prefer to receive PDF proofs by email.
 Website Address: _____

Personalization Panel: (Check all that apply - send text and images (300 dpi) by email or fax if changed from last order)

Use: Doctor's Name Practice Name Design my Personalization Panel with the following enclosed items:

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> Testimonials | <input type="checkbox"/> Supplied article | <input type="checkbox"/> Event announcement | <input type="checkbox"/> Staff changes |
| <input type="checkbox"/> Map | <input type="checkbox"/> Office hours | <input type="checkbox"/> Photograph(s) | <input type="checkbox"/> Birthday list |
| <input type="checkbox"/> Practice logo | <input type="checkbox"/> Referral list | <input type="checkbox"/> Special offer | <input type="checkbox"/> Patient Media article |

Postage: (Check one)

- Leave the postage indicia area blank. We will apply stamps.
 Use indicia. Permit city: _____ Permit number: _____
 First Class Standard Presort (Bulk)

Folding: (Fill in all quantities desired) If no selection, all newsletters will be folded as Mailer with tab.



◀ **Booklet**

Quantity



▲ **Mailer**

- _____ 8½" x 5½" **Mailer with tab** (Standard, 2 folds, mails with a first-class stamp)
 _____ 8½" x 5½" **Mailer no tab** (Standard, 2 folds, mails with a first-class stamp)
 Please include _____ loose tabs with my order (I will apply by hand)
 _____ 8½" x 11" **Booklet no tab** (1 fold. Use for your front desk display)

Delivery: (Check one)

- Ship all newsletters to our office address above
 Ship all newsletters to the mailing facility named below
 Ship _____ newsletters to our local mailing facility and the balance to our office

Attention: _____ Mailing Facility: _____
 Address: _____ City/State/Zip: _____
 Phone: (_____) _____

Quantity: Minimum order 200 pieces. (Includes folding and tabbing per U.S. Postal regulations.)

(200 – 999) copies to be printed: _____ X \$.45 each = \$ _____

or

(1000 or more) copies to be printed: _____ X \$.39 each = \$ _____

Shipping: Allow an additional 3-4 days for printing. Prices for U.S. customers only. Call for non-U.S. pricing.

Total number of copies: _____ X \$.07 each for UPS 3-Day shipping = \$ _____

Total number of copies: _____ X \$.04 each for UPS Ground shipping = \$ _____

Payment:

(For cardholder protection, please do not include a complete credit card number on this order form.)

\$65 Design and proofing fee = \$ **65**

- Check enclosed - Check No. _____ **Total This Order** = \$ _____
 I will call Patient Media with the credit card information
 Credit Card on file with Patient Media office - Last four digits of card number for verification _____
 Please call our office to obtain credit card information - Name of Contact _____

Send this along with your Personalization Panel materials to:

Patient Media, Inc. • 215 Sutton Lane, Colorado Springs, CO 80907 • Questions? Call (800) 486-2337
 Fax your materials to: (800) 201-0185 • E-mail your materials to: newsletter@patientmedia.com

Relief & Wellness News

The customized-personalized-patient-newsletter-that-patients-read newsletter.

After slaving over your office newsletter for weeks, you print it, mail it and wait for some kind of patient response. And wait...

The fact is, other patient newsletters are merely “brochures” about some symptom or complaint, a wordy essay on whiplash or zucchini bread recipes.

As you can see, **Relief & Wellness News** is different. Professional graphics. Lots of short, bite-sized articles, and useful information — not just about chiropractic. We do all the work to make chiropractic interesting, relevant and compelling.

“We notice a number of patients that haven’t come in for a while, who call for an appointment soon after the newsletter comes out.”
— Danny R. Beard, D.C.

“We notice an average of 10-15 reactivations in the weeks following the newsletter distribution. Our active patients comment on the articles and the feedback has been outstanding. It’s congruent with our particular style as a Wellness Chiropractic Office. Thanks for making me look like a star!”
— Bert Vanderblik, D.C.

“People are taking the time to look at them, and I think in today’s hectic world, that’s great.”
— Philip J. Bradshaw, D.C.

Here’s our Summer 2010 Issue. Complete the Order Form and fax it to (800) 201-0185. Email your photos, logo and practice announcements and other text to **Newsletter@patientmedia.com**. (*Images need to be 300 dpi jpg, please.*) You may also request an email Order Form at **Newsletter@patientmedia.com**. You will receive your first proof by fax (*or email, if you choose*) of your customized issue for your approval in about a week. Then, per your delivery instructions, we’ll print, fold, tab and ship them to your office or mailing facility for addressing and mailing. Easy!

The whole process usually takes about three weeks from the time we get your materials. No subscription is necessary, but based on the patient reactivations you’ll get, you’ll want to participate in every quarterly issue.



William D. Esteb
Editor