

SUBSCRIPTION	Item #	Subscription products	Price per Student/year	ENTER # OF STUDENTS:	SUBTOTAL
	<input type="radio"/> A102001600024	DRA3 Online 1-year license per student Includes browser-based administration, scoring, and an expanded selection of reporting options. Student data is easily captured, scored, and reported at the student, class, school, district, or provincial level. <i>(Minimum 1 prior DRA3 K-3 kit #A103000132987 or DRA-3 4-8 kit #A103000132988 purchase per school required)</i>	\$2.80	X <input type="text"/>	= <input type="text"/>
	<input type="radio"/> A103000232504	DRA3 K-3 Benchmark Book (Digital) 1-year teacher license <i>(Minimum 1 prior DRA3 K-3 kit #A103000132987 purchase per school required)</i>	Price per Teacher/year* \$22.45	X <input type="text"/>	= <input type="text"/>
	<input type="radio"/> A103000232505	DRA3 4-8 Benchmark Book (Digital) 1-year teacher license <i>(Minimum 1 prior DRA3 4-8 kit #A103000132988 purchase per school required)</i>	\$22.45	X <input type="text"/>	= <input type="text"/>
			SUBSCRIPTION TOTAL		<input type="text"/>

*Volume discounts not applicable on Benchmark Book licenses.

TRAINING OPTIONS	Item #	Training Products	Price	ENTER QUANTITY:	SUBTOTAL
	<input type="radio"/> A103000150990	Getting Started with DRA3 Onsite (first session)	\$7,000	X <input type="text"/>	= <input type="text"/>
	<input type="radio"/> A103000150991	Getting Started with DRA3 Onsite (consecutive days)	\$2,700 per session	X <input type="text"/>	= <input type="text"/>
	<input type="radio"/> A103000150992	Getting Started with DRA3 Webinar	\$2,100	X <input type="text"/>	= <input type="text"/>
<input type="radio"/> A103000150993	Transitioning from DRA2 to DRA3 Webinar	\$680	X <input type="text"/>	= <input type="text"/>	
<input type="radio"/> A103000150994	DRA3 Live Question and Answer Virtual - 1 Hour	\$500	X <input type="text"/>	= <input type="text"/>	
				TRAINING TOTAL	<input type="text"/>
				ORDER TOTAL BEFORE APPLICABLE TAXES	<input type="text"/>

ACCOUNT MANAGER INFORMATION: (REQUIRED)

Name: _____

Title: _____

Email (Required): _____

District Name: _____

School Name: _____

Address: _____

City/Province/P.C.: _____

Phone: _____ Ext. _____

Fax: _____

BILL TO: (REQUIRED)

Organization: _____

Name: _____

Address: _____

City/Province/P.C.: _____

Phone: _____ Ext. _____

Fax: _____

ORDER OPTIONS

Upon completion of this form, please return it to
Customer Care by email: cs.canada@pearson.com or call
1-866-335-8418 for additional options.

PAYMENT OPTIONS

- ☐ Payment Enclosed
- ☐ Purchase Order # Please submit a signed PO
- ☐ Credit Card - Please have a representative contact me at the following phone number upon processing this order.
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For further information or questions, please contact us at **1-866-335-8418**.

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- ☐ Yes, I would like to be added to Pearson Clinical Assessment Canada's email distribution list to receive eNews, updates, invitations and promotions.
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