# **CATCHUP MATH**

#### **Order Form**

Please fill out and submit this form with your Purchase Order, Check, or Credit Card info to:

Hotmath, Inc. 18 Sunset Drive Kensington, CA 94707

School, School District, or College (if this	is a multi-school or	der, please also co	omplete page 2)
Institution:			
Address:			
City:	State:	Zip Code:	
Purchase order number (if applicable):	Login Name (if renewal):		
Primary To	eacher/Administrat	or	
(Delivery and training will be arr	anged with this pers	on via email/telep	ohone)
Name:	Title:		
Email address:	Phone:		
Alternate contact:			
For pricing, refer to your proposal or the online purpose of students times the per-students	lent rate of \$	: \$	
Licenses dates:			
No. of schools (district orders only) times \$	250 (please comple	te page 2): \$	
Number of PD days times \$1,500:		\$	(plus t/e)*
*Note: Price for PD does not include trainer's travel	l expenses, which will	be billed separately	at actual cost.
	TOTA	AL ORDER: \$	

Catchup Math licenses and professional development are non-taxable and there are no shipping charges. The Federal Tax ID# for Hotmath, Inc. is 68-0454088 and we are not subject to backup withholding.

Please tell us how you heard of Catchup Math:

# **Catchup Math Multiple Site Information Page**

Duplicate this page as needed for additional schools

## **Enter First School in this Column:**

### **Enter Second School in this Column:**

Site Information:	Site Information:	
School Name	School Name	
Address	Address	
City/State/Zip	City/State/Zip	
No. of Licenses	No. of Licenses	
Existing Login Name (if applicable)	Existing Login Name (if applicable)	
School Level Primary Contact Info:	School Level Primary Contact Info:	
Name	Name	
Title	Title	
Phone	Phone	
E-Mail	E-Mail	
Other School Level Contact (optional):	Other School Level Contact (optional):	
Name	Name	
Title	Title	
Phone	Phone	
E-Mail	Email	