

# OCUTECH®

## VES®-SPORT II (Manual Focus) ORDER FORM

### VES®-SPORT II

FAX: 919 967-8146

**ACTION REQUESTED:**  Estimate Only  Place Order

ACCOUNT NAME \_\_\_\_\_ PATIENT NAME \_\_\_\_\_

PRESCRIBER'S NAME \_\_\_\_\_ PATIENT AGE \_\_\_\_\_  M  F

ADDRESS \_\_\_\_\_ PATIENT DIAGNOSIS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ P.O. NO. \_\_\_\_\_

COUNTRY \_\_\_\_\_ PHONE \_\_\_\_\_ OFFICE CONTACT \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_ FAX \_\_\_\_\_

**1 TYPE of ORDER:**  PATIENT SYSTEM  DIAGNOSTIC KIT *Select power(s) below*

**2 TELESCOPE**

Telescope for which Eye? OD OS Exact PD for position of telescope eyepiece:

Telescope Power  4x  5x  6x

Telescope Case Color  Black (standard)  Silver (standard)  Blue  Green  Red  Pink  Other: \_\_\_\_\_

**3 CARRIER LENSES**

OD: ADD Distance PD OD OS

OS: ADD Near PD OD OS

Lens Type: Material:  CR-39  Hi-Index  Polycarbonate Seg. height

Special instructions: (Tint, coatings, etc.)

**4 EYEPIECE CORRECTION** NO YES Specify Rx:

**5 FRAME** (Choose One Style, Frame Size, Temple Style and Length, and Color) VISIT OUR WEBSITE FOR COMPLETE SELECTION

<b>Ocutech Unisex</b>	Frame Size: <input type="checkbox"/> 49/18 <input type="checkbox"/> 51/18 <input type="checkbox"/> 53/18 (Available in Bronze and Silver)	<input type="checkbox"/> Gold <input type="checkbox"/> Bronze <input type="checkbox"/> Silver
<b>Ocutech K Style</b>	Frame Size: <input type="checkbox"/> 51/18 <input type="checkbox"/> 53/18 <input type="checkbox"/> 55/18 <input type="checkbox"/> 57/18	<input type="checkbox"/> Gold <input type="checkbox"/> Bronze <input type="checkbox"/> Silver
<b>Ocutech Sleek</b>	Frame Size: <input type="checkbox"/> 50/18 <input type="checkbox"/> 53/18	<input type="checkbox"/> Silver <input type="checkbox"/> Gun Metal
Temples	Skull <input type="checkbox"/> 135 <input type="checkbox"/> 140 <input type="checkbox"/> 145 Cable <input type="checkbox"/> 155 <input type="checkbox"/> 160 <input type="checkbox"/> 165	
Pediatric	<input type="checkbox"/> K Style 48/18/140 <input type="checkbox"/> Unisex 47/18/140	<input type="checkbox"/> Silver <input type="checkbox"/> Bronze

**6 ACCESSORIES**

**Patient Case**  Yes  No  Other

**Slip-Behind Sun Filters (For Ocutech frames only)**  Gray  Brown  Yellow

Specify eyepiece aperture:  Filter covers eyepiece  Eyepiece not covered by filter

**Filter Cap** Specify color:

**Reading Cap** Specify power:

**7 SPECIAL INSTRUCTIONS:**

**8 AUTHORIZATION:** Credit Card  VISA  MasterCard

Card #	Code	Exp. Date
Name on Credit Card		
Signature		Date