



85 Old Eagle School Rd, Suite 103
 Strafford, PA 19087
 phone: 484.580.8754
 fax: 484.580.6930
 clerycenter.org

Campus Security Authority (CSA) Reference Guide Order Form

Ship to:
 Name: _____
 Title: _____
 Institution: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Email: _____ Phone: _____ Fax: _____

Description	Price Per Unit	Qty.	Subtotal (\$)
CSA Reference Guide (single copy)	\$15.00		
CSA Reference Guide (bundle of 5 guides)	\$70.00 <i>(\$14.00 each)</i>		
CSA Reference Guide (bundle of 25 guides)	\$300.00 <i>(\$12.00 each)</i>		
CSA Reference Guide (bundle of 50 guides)	\$500.00 <i>(\$10.00 each)</i>		

Shipping & Handling:
Standard shipping and handling rates included.

Total # of Items: _____
 Total Cost (\$): _____

Method of payment:

Purchase Order #: _____
Please include a copy of the PO with your order form.

Check *(Please make your check payable to "Clery Center" and mail it along with your order form.)*

Credit Card: VISA MasterCard American Express Discover

Card Number: _____
 Expiration Date: _____ Security Code: _____
 Name on Card: _____
 Billing Street Address: _____
 City: _____ State: _____ Zip Code: _____

Please email this form to carold@clerycenter.org or fax to 484.580.6930.



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Reference Guide - Collecting, Classifying & Counting Clery Act Crime Data Order Form

Ship to:
 Name: _____
 Title: _____
 Institution: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Email: _____ Phone: _____ Fax: _____

Description	Price Per Unit	Qty.	Subtotal (\$)
Collecting, Classifying & Counting Clery Act Crime Data (single copy)	\$20.00		
Collecting, Classifying & Counting Clery Act Crime Data (bundle of five guides)	\$75.00 <i>(\$15.00 each)</i>		

Shipping & Handling:
Standard shipping and handling rates included.

Total # of Items: _____
 Total Cost (\$): _____

Method of payment:

___ Purchase Order #: _____
Please include a copy of the PO with your order form.

___ Check *(Please make your check payable to "Clery Center" and mail it along with your order form.)*

___ Credit Card: ___ VISA ___ MasterCard ___ American Express ___ Discover

Card Number: _____
 Expiration Date: _____ Security Code: _____
 Name on Card: _____
 Billing Street Address: _____
 City: _____ State: _____ Zip Code: _____

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Educational Video Order Form

Ship to:
 Name: _____
 Title: _____
 Institution: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Email: _____ Phone: _____ Fax: _____

Description	Price Per Unit	Qty.	Subtotal (\$)
Responsible Employee Training Video and Campus Security Authority Training videos (bundle)	\$700.00 (\$350 each)		
Responsible Employee Training Video	\$395.00		
Campus Security Authority (CSA) Training Video	\$395.00		
“Speak Out & Stand Up” (Sexual Assault Prevention Video)	\$75.00		
“Culture of Silence” (Stalking Awareness & Education Video)	\$55.00		
“Wasted Youth” (Alcohol Education Video)	\$55.00		

Shipping & Handling:

Standard shipping and handling rates included.

Total # of Items: _____
 Total Cost (\$): _____

Method of payment:

___ Purchase Order #: _____
Please include a copy of the PO with your order form.

___ Check (Please make your check payable to “Clery Center” and mail it along with your order form.)

___ Credit Card: ___ VISA ___ MasterCard ___ American Express ___ Discover

Card Number: _____
 Expiration Date: _____ Security Code: _____
 Name on Card: _____
 Billing Street Address: _____
 City: _____ State: _____ Zip Code: _____

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