## **CFP Subscription Order Form**

Date:	
Contact Name:	
Phone:	
E-mail	



Canadian Foriegn Policy 2116DT - 1125 Colonel By Drive Ottawa, Ontario Canada K1S 5B6 Phone: 613-520-6696 Fax: 613-520-3981 www.carleton.ca/cfpj

## **Deliver To:**

Subscriber:	
Address:	
State/Province:	
Country:	
Zip/Postal Code:	
Phone:	
Fax:	
E-mail:*	

\*required for online access

O Personal Subscription		Shipping & Handling	Subscription Type		Cont	T 9/	T		Tatal
Institutional Subscription		manuning	туре	Year(s)	Cost	Tax %	Tax	4	Total
	с		Domestic	1	\$ 104.76	5%	\$ 5.24	\$	110.00
<ul> <li>○ Inside Canada</li> <li>○ Outside Canada*</li> </ul>	a n a d a	Included	Institution	2	\$ 200.00	5%	\$ 10.00	\$	210.00
				5	\$ 452.38	5%	\$ 22.62	\$	475.00
			Domestic Individual	1	\$ 57.14	5%	\$ 2.86	\$	60.00
Add \$5/Issue for postage				2	\$ 104.76	5%	\$ 5.24	\$	110.00
				5	\$ 228.57	5%	\$ 11.43	\$	240.00
○ Begin subscription with current issue			Single Issue	0.33	\$ 23.81	5%	\$ 1.19	\$	25.00
○ Begin subscription with next issue	A b	\$5.00/	Foreign Institution	1	\$ 119.76	0%	\$ -	\$	119.76
$\sim$ 2 .				2	\$ 230.00	0%	\$ -	\$	230.00
				5	\$ 527.38	0%	\$ -	\$	527.38
○ 1 Year				1	\$ 72.14	0%	\$ -	\$	72.14
2 Years 0		ISSUE	Foreign Individual	2	\$ 134.76	0%	\$ -	\$	134.76
🔿 3 Years	d		marviduar	5	\$ 303.57	0%	\$ -	\$	303.57
⊖ Single Issue Issue:			Single Issue	0.33	\$ 28.81	0%	\$ -	\$	28.81

## Payment

○ Check or money order payable to Carleton University - CFP

○ Credit Card

○ Mastercard

🔿 Visa

Card Number:	
Expiration Date:	
Verification Number:	

Cardholder Name:

Automatic Renewal at end of term

## **Internal Use Only**

Order Completed:	
Ship Date:	