



## Written Information Request Form

Please submit at least one page of your natural handwriting on blank, unlined paper. If printing is your natural style send a sample of that as well. We prefer that you write spontaneously and not copy any content from another source. Please sign and date the writing sample. Also, please send a copy of this request form along with your order.

**Send materials via fax** to (866) 906-4011, or

**Send material via regular mail** to: P.O. Box 204, Bloomfield Hills, MI 48303

### Personal Information:

Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

Handedness  Right  Left

### Mailing Address:

Street 1 \_\_\_\_\_

Street 2 \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip \_\_\_\_\_

Country \_\_\_\_\_

Telephone (home) \_\_\_\_\_

Telephone (work) \_\_\_\_\_

Email Address \_\_\_\_\_

### Cost:

30 minute tape \$150

60 minute comprehensive tape \$200

Written analysis with follow-up questions \$200



P.O. Box 204 Bloomfield Hills, Michigan 48303 T: (248) 540-7026 F: (248) 540-1225

P.O. Box 27, Duxbury, Massachusetts 02331 T: (617) 216-5474 F: (866) 906-4011

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