

# Metro International Publication Order Form 30<sup>th</sup> Anniversary Special

**Order Information:**

Name: \_\_\_\_\_  
 Title: \_\_\_\_\_  
 Department/Institution: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Telephone: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_  
 Email: \_\_\_\_\_

**Shipping Information:** *(if different from ordering information)*

Name: \_\_\_\_\_  
 Title: \_\_\_\_\_  
 Department/Institution: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Telephone: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_  
 Email: \_\_\_\_\_

**PUBLICATIONS**

- THE INTERNATIONAL STUDENTS' GUIDE TO LIVING IN NEW YORK CITY**
- HELP YOURSELF TO HOUSING**
- DISCOUNT PACKAGE**—buy both publications together for a special combined price!

Quantity	x	Price	=	Subtotal
_____	x	\$ _____	=	\$ _____
_____	x	\$ _____	=	\$ _____
_____	x	\$ _____	=	\$ _____
<i>Total Due</i>				\$ _____

**SPECIAL INSTITUTIONAL MEMBER PRICING:**

Quantity	Help Yourself to Housing - 30 <sup>th</sup> Special	International Students' Guide - 30 <sup>th</sup> Special	Discount Package – Buy Both!
1	5.00 <del>6.00</del>	7.00 <del>8.00</del>	10.00 <del>12.00</del>
2-24	4.00 <del>5.00</del>	5.00 <del>6.00</del>	8.50 <del>9.50</del>
25-99	2.50 <del>3.50</del>	3.00 <del>4.00</del>	5.50 <del>6.50</del>
100-199	2.00 <del>3.00</del>	2.50 <del>3.50</del>	4.50 <del>6.00</del>
200+	1.50 <del>2.50</del>	2.00 <del>3.00</del>	3.50 <del>5.00</del>

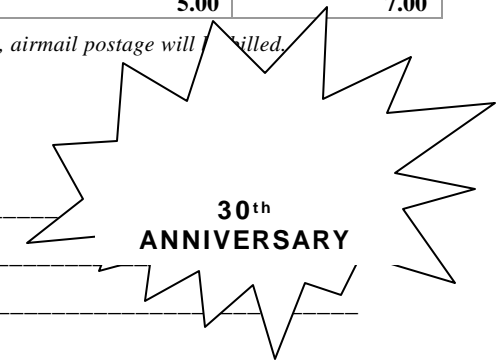
**REGULAR PRICING:**

Quantity	Help Yourself to Housing	International Students' Guide	Discount Package – Buy Both!
1	8.50	10.00	15.00
2-24	7.00	8.50	12.50
25-99	6.00	7.00	10.00
100-199	5.00	6.00	8.50
200+	4.00	5.00	7.00

*Note: The above bulk prices include cost of postage and handling within the U.S.; please allow two weeks for delivery. For shipments outside the U.S., airmail postage will be billed.*

**PAYMENT INFORMATION:**

- I have enclosed \$ \_\_\_\_\_
  - Please bill me \$ \_\_\_\_\_
  - Please bill my Mastercard/Visa account # \_\_\_\_\_
- Expiration Date: \_\_\_\_\_ Signature: \_\_\_\_\_
- Billing Name/Address (if different from above): \_\_\_\_\_
- Three Digit Security Code (last three digits on back of your card) \_\_\_\_\_



**Make check payable to METRO INTERNATIONAL and return with a copy of this form to:**  
**Metro International, 285 West Broadway, Suite 450, New York, NY 10013**  
**\*\*Orders may be faxed to (212) 941-6291. Please call (212) 431-1195 with any questions.\*\***