SDHSAA FREE LOAN
SPEECH ACTIVITY
DVD/VIDEO CASSETTE ORDER

NAME_____ **SCHOOL PHONE**_____

SCHOOL_____

STREET_____

CITY_____ **ZIP** _____

DATE (first preference) NEEDED_____

Second Preference_____

PLEASE USE ITEM NUMBERS FOR ALL MATERIALS ORDERED

ITEM #	VHS (if available) or DVD	TITLE

speech/vid-book\fr-video-ord

SEND ORDER TO:

SDHSAA
P.O. BOX 1217
PIERRE, SD 57501

FAX: 224-9262

FOR SDHSAA USE ONLY

Date order received:_____

Date order sent: _____

Date order due return: _____