

Doctors Developed A Better Hand Therapy



The Carpal Solution

Call 1-800-798-5210



FAX or Mail-In Order Form (FAX #: 00-1-617-812-0094)

We Ship to the UK Every Day. It Always Arrives Because the Local Delivery System in Britain is consistently reliable.

Dr. Morgan's Six Week Carpal Solution Protocol relieves symptoms in days. It consists of wearing the Carpal Solution every night for 2 weeks followed by every-other-night for 4 weeks.

Prices are subject to fluctuation with exchange rate changes.

6 Week Carpal Solution Therapy Pac (28 Disposable Devices) in British Pounds Sterling

Right Hand Quantity _____ £61 each (multiple quantity X £61.) Sub Total £ _____ line A

Left Hand Quantity _____ £61 each (multiple quantity X £61) Sub Total £ _____ line B

One Year Carpal Solution Wellness Therapy Pac (56 Disposable Devices)

Right Hand Quantity _____ £91 each (multiple quantity X £91) Sub Total £ _____ line C

Left Hand Quantity _____ £91 each (multiple quantity X £91) Sub Total £ _____ line D

(Add lines A through D)

PRODUCT TOTAL £ _____ line E





Shipping & Handling We Ship Throughout Europe Duty Free – proven reliable delivery via FEDEX Courier:

FEDEX Federal Express No Duty Within EU with Tracking Number (2 to 5 days) £ 10.00 line F

(Add lines E and F) **TOTAL CHARGED TO CREDIT CARD** £ _____ line G

Billing Information (as appears on billing statement)

Ship To Information

| | | |
|--|---|--|
| First Name | | |
| Last Name | | |
| Street Address | | |
| Apartment Number | | |
| City | | |
| County | | |
| Postal Code | | |
| Country | | |
| Phone | | |
| Email address is available | | Order shipment and commercial receipt is sent by email if provided |
| Circle One - Credit or Debit Card Type |     | <p>*C V V Number – On Master Card, VISA or Discover cards it is the last three digits on the back of the card following your credit card number. On American Express it is the four digit number above the credit card number on the front of the card.</p> |
| Card Number | | |
| Expiration Date | | |
| C V V Number* | | |

check box if address is same

Amount to be Charged to my Credit or Debit Card in £ _____ from Line G above

Card Holder Signature _____ Date _____

Most people pay by credit card or debit card - If you would like to pay by **PayPal there is a € 6 surcharge you must add to the total** – then login to your PayPal account and send payment with the surcharge to relief@mycarpaltunnel.com Then send an email to relief@mycarpaltunnel.com with your shipping details and specify the product you would like to order.



Make Money Order or Bank Draft Payable to First Hand Medical, and send with order form to:

First Hand Medical, 3434 East 7800 South Street, Suite 328, Salt Lake City, UT 84121 USA

Phone: 00-1-801-930-9240 or: 00-1-617-794-0503 - FAX: 00-1-617-812-0094 - email: relief@MyCarpalTunnel.com

Check out the most comprehensive information on CTS available at: www.MyCarpalTunnel.com