

# HORIZON PRESCRIPTION SAFETY GLASSES ORDER FORM

Please print this form and mail or fax to us with. Call us if questions: 314-961-7406 / 888-254-7406  
If you are ordering prescription lenses from us for your Horizon frame,  
also fax your current eyeglass Rx with pupil distance measurement.

**If the pupil distance isn't on your Rx, call your eyeglass professional and write the measurement on your Rx.**

## Fax Orderform & your Rx to 314-558-1102

Your Name \_\_\_\_\_

Day Phone # \_\_\_\_\_ Evening Phone # \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Email \_\_\_\_\_

<b>Circle the frame you want and enter the price here -----&gt;</b> <b>Horizon #3 Green: \$85      Horizon SCT Cobalt Blue: \$110</b> <b>Horizon #5 Green: \$85</b>	<b>Frame Price</b>  <b>\$</b>
<b>Safety Lens Section for your Horizon Safety Frame</b> <b>Circle your choice below and enter the \$ amount -----&gt;</b> <b>Plano (non prescription lenses) - \$55</b> <b>Single Vision - \$70    Lined Bifocal - \$90    Std. Progressive - \$135</b> <b>Premium Progressive-\$170 (wider near zone, less peripheral distortion)</b>	<b>\$</b>
<b>TD2 Premium Anti Scratch Coating, add \$44</b>	
<b>Multi Layered Anti Reflective Coating (both sides) add \$60</b>	
<b>Optional Zippered Hard Case w/ belt buckle, add \$15</b>	<b>\$</b>
<b>UPS Shipping Costs: \$8 Ground, \$18 2nd day</b>	<b>\$</b>
<b>Subtotal of all costs</b>	<b>\$</b>
<b>Payment Method:      MC      Visa      Disc      Amex</b>	
<b>Name on Credit Card:</b>	
<b>Credit Card # :</b>	<b>Exp Date:      3 digit code:</b>
<b>Questions/Comments:</b>	

Note: Please ensure your Pupil Distance (PD) figure is on your prescription or your order will be delayed. If your PD is not on your prescription, call your eyeglass store and obtain the measurement and write it on your prescription for us.  
Additional costs will be added for prescription items as follows: Prism: \$10, Sphere >6: \$20, Cylinder >2: \$10.