

## NATIONAL O&P FACILITY DIRECTORY INSERTION ORDER

*This completed insertion order must be returned before your ad is posted online.*

### ENSURE YOUR FACILITIES ARE INCLUDED IN OUR NATIONAL DATABASE.

**opedge.com/facilities** – Where patients go to find an O&P provider.


**\$40/month: Featured Listing**

**Westcoast Brace & Limb**

5311 E Fletcher Ave  
 Temple Terrace, FL 33617-1147, US  
 Phone: ☎ (813) 985-5000  
 Fax: ☎ (813) 985-4499

[wcb.com](http://wcb.com) [gbauer@wcb.com](mailto:gbauer@wcb.com)

2.17 miles



Please provide the information below:

- Facility Name \_\_\_\_\_
- Address \_\_\_\_\_
- Phone \_\_\_\_\_
- Fax \_\_\_\_\_
- Logo (please email as a .jpg or .png file)
- Website \_\_\_\_\_
- Email \_\_\_\_\_
- Links to social media (please email links requested)

**\$25/month: Standard Listing**

**Horizon Prosthetics, LLC**

1724 Magestic Dr  
 Lafayette, CO 80026, US  
 Phone: ☎ (720) 549-9136  
 Fax: ☎ (303) 593-3593

8.06 miles



Please provide the information below:

- Facility Name \_\_\_\_\_
- Address \_\_\_\_\_
- Phone \_\_\_\_\_
- Fax \_\_\_\_\_

**Be included in the go-to industry resource for patients seeking an O&P provider in their area – [opedge.com/facilities](http://opedge.com/facilities)**

### BUSINESS CONTACT INFORMATION

Company Name \_\_\_\_\_

Person Placing Ad \_\_\_\_\_ Email \_\_\_\_\_

Billing Contact \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_

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

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Business EIN \_\_\_\_\_

### FORM OF PAYMENT

Credit Card (check one)  Visa  MasterCard PO# (if applicable) \_\_\_\_\_

Credit Card Number \_\_\_\_\_ Exp. Date \_\_\_\_\_

Name on Card \_\_\_\_\_ CVC# \_\_\_\_\_

### AGREEMENT

1. This insertion order confirms that I have authorized the purchase of advertising space as described above. I understand this must be signed and returned and that my ad will not run until I receive confirmation that this form was received.
2. I authorize Western Media LLC to process payment against the above credit card, if provided.
3. Cancellation of all ads/contracts requires a 60-day written notice.
4. Facilities are billed monthly until further notice by owner. Price listed is monthly, per location.
5. In the event an action is brought to enforce the terms of or collect fees under this contract, Western Media LLC is entitled to all costs and expenses, including reasonable attorney's fees.

*To be completed by EDGE Media Group:*  
 Facility \_\_\_\_\_  
 Date Online \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**INSTRUCTIONS:** Save this form to your hard drive, then email it as an attachment to [sales@opedge.com](mailto:sales@opedge.com).  
 Attach your logo file in JPG or PNG format, as well as requested social media links.