

Growing Strong Flip Charts

Resource Order Form (May 2011)



Queensland Government
Queensland Health

Date: ____/____/20__

Name/Business: _____



THE DR EDWARD KOCH
FOUNDATION

Occupation _____

Address: _____

Postcode: _____

Daytime phone: _____ Mobile: _____ Fax: _____

Email: _____

<i>Resource aimed at improving the health of Aboriginal and Torres Strait Islander mothers, babies and young children</i>	Unit Price \$	Qty	Total \$		
“Growing Strong, Feeding You and Your Baby” A3 size – set of two with stand					
<table border="0" style="width: 100%;"> <tr> <td style="width: 50%; vertical-align: top;"> Flip Chart 1: “Healthy food in pregnancy” <ul style="list-style-type: none"> • Healthy food in pregnancy • Pregnancy issues • Physical activity • Alcohol, tobacco and other drugs • Pregnancy & diabetes • How to breastfeed • Good for Baby & Mum • Expressing breastmilk • Babies’ growth • How Dads can help • Growth checks </td> <td style="width: 50%; vertical-align: top;"> Flip Chart 2: “Starting Solids” <ul style="list-style-type: none"> • Starting solids • Iron rich foods • Formula feeding • Healthy drinks for Baby • Healthy foods 1-4 years • Healthy drinks 1-4 years • Healthy food ideas • Sterilising bottles • Overweight children • Keeping food safe • Food & drinks for grandkids </td> </tr> </table>	Flip Chart 1: “Healthy food in pregnancy” <ul style="list-style-type: none"> • Healthy food in pregnancy • Pregnancy issues • Physical activity • Alcohol, tobacco and other drugs • Pregnancy & diabetes • How to breastfeed • Good for Baby & Mum • Expressing breastmilk • Babies’ growth • How Dads can help • Growth checks 	Flip Chart 2: “Starting Solids” <ul style="list-style-type: none"> • Starting solids • Iron rich foods • Formula feeding • Healthy drinks for Baby • Healthy foods 1-4 years • Healthy drinks 1-4 years • Healthy food ideas • Sterilising bottles • Overweight children • Keeping food safe • Food & drinks for grandkids 			
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PRICE OF SET (2 flip charts) includes GST, postage & handling	\$185.00				

Payment Method (Please tick)

Direct Deposit

Bank: Cairns Penny Savings & Loans
BSB: 704-966 Account #: 100 011 498

Amount: \$ _____

Account Name: Dr Edward Koch Foundation

Ref: “Your surname/business name”

Credit card

I authorise the Dr Edward Koch Foundation or its agents to charge the stated amount as outlined above on my credit card. My signature is below for this authorisation. I also acknowledge that the Foundation is not required to produce a copy of a signed and validated sales voucher to obtain payment.

Card type: Visa Mastercard *We only accept Visa & Mastercard*

Cardholder name: _____

Card number:

Expiry date: ____/____/____ Amount: \$ _____ CV Number: ____

Cardholder signature: _____ Date: ____/____/2011

Cheque/Money Order *All cheques to be made out to: Dr Edward Koch Foundation*

Amount \$ _____

Please email/fax/mail to: ATTENTION: Dulcie Bird / Angela Johnson

Dr Edward Koch Foundation

PO Box 2964, Cairns QLD 4870

Tel: 07 4031 0145

Fax: 07 4031 0744

Email: admin@kochfoundation.org.au

ABN: 19 078 012 576