



# GAPS TEST ORDER FORM

Date: \_\_\_\_\_  
Customer Name: \_\_\_\_\_  
Customer Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Payment Method \_\_\_\_\_

**Please Indicate Quantity:**

Type of Test	UK mail	Quantity	Europe	Quantity	Rest of world	Quantity
Parent Version	£50		£55		£60	
Professional Version	£65		£70		£75	
25 Additional Forms	£25		£28		£35	
50 Additional Forms	£40		£45		£50	
<b>Grand Total</b>						<b>£</b>

**Cheques:** Make payable to H.K.J. van der Lely, DLDCN Centre

**Transfers:** Please transfer to  
*Account No:* 05698853 *Sort code:* 11 91 15  
Reference box: H. K. J. van der Lely, DLDCN Centre,  
P 113731006

**Please write your name in the reference box when transferring the money.**

**Overseas transfers:** (PAYMENT IN STERLING)  
IBAN GB67HLFX11911505698853  
Bank of Scotland, Glasgow (Intelligent Finance)  
Reference box: H. K. J. van der Lely, P 113731006

**Please write your name in the reference box when transferring the money.**

**Paypal Option:** This will include a 3% charge for credit card payments

**Return order forms to:** DLDCN.Com, PO BOX 60225, London, EC1P 1FF  
*Tel:* 07806 854 435 *Fax:* 020 7905 1224

**Or email the order forms as an attachment to**  
gaps@dldcn.com



Centre for Developmental Language Disorders and  
Cognitive Neuroscience