



YES. I would like to order the following presentations form the 2010 AMAB Conference:

Presenter	Program Title	Quantity
<input type="checkbox"/> Heidi Scheer	Our Journey Through The Autism Spectrum	_____
<input type="checkbox"/> Patrick Elliot, DO	A New Paradigm In Evaluating Alternative Intervention In The Treatment Of ASD	_____
<input type="checkbox"/> Phillip DeMio, MD	?Que Es Lo Importante? Important Treatments Of ASD (Spanish and English)	_____
<input type="checkbox"/> Lyle Hatcher & Don Caron	AD/HD: Living With "The Feeling"	_____
<input type="checkbox"/> Stephanie Harlan	Parents Empowered!	_____
<input type="checkbox"/> Dr. Laurie Lundblad	Charting The Course: Using Assessment To Navigate Choices in Autism	_____
<input type="checkbox"/> Phillip DeMio, MD	The Immune System in ASD	_____
<input type="checkbox"/> Raun Kaufmann	Breakthrough Developmental Strategies And The Biomedical Connection	_____
<input type="checkbox"/> James Neubrandner, MD	Autism Spectrum Disorder's Phase Reset with HBOT and Methyl-B12	_____
<input type="checkbox"/> Joyce DeMio	Special Diets: How To Get Started	_____
<input type="checkbox"/> Mayer Eisenstein, MD	Why My Practice Has Virtually No Autism	_____
<input type="checkbox"/> Kristin Selby Gonzalez	Dynamic Duo: Diet & Enzymes	_____
<input type="checkbox"/> Mary Tocco	Vaccine Toxicity & Immunity	_____
<input type="checkbox"/> Sue Owens	Sulfur & Oxalate Metabolism In Persons With Special Needs	_____
<input type="checkbox"/> Andrea McNinch	Raw Foods Presentation	_____
<input type="checkbox"/> Angela Woodward	Points On Detoxification In ASD	_____
<input type="checkbox"/> Drs. Nicole Poirier Keenan and Don Galovich	Chiropractic: A Focus On The Autonomic Nervous System & The Implications For The Challenged Child With ASD	_____
<input type="checkbox"/> Carolyn Gammicchia	ABC's Of Education Advocacy For Students With Autism	_____

Total DVDs Ordered _____

Individual DVD's are \$20.00 each.

Purchase entire set for only \$225.00

Check here to order entire set: _____

Purchaser Information:

Name: _____

Address: _____

City: _____

State: _____ Zip code: _____

Date: ____/____/____

Remit to:

American Medical Autism Board
2010 Conference DVD Orders
320 Orchardview Avenue, Suite 2
Seven Hills, OH 44131

Tel: 216-901-0441
Fax: 216-901-0485

You may also Order Online
from our secure PayPal site at

www.AmericanMedicalAutismBoard.com