



# CDM® | CFPP® STUDY MATERIALS ORDER FORM

Prepare for success with materials from ANFP

Name \_\_\_\_\_ ANFP Member # \_\_\_\_\_  
 Company Name \_\_\_\_\_  
 Mailing Address \_\_\_\_\_ [ ] Residence [ ]  
 Business \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Daytime Phone ( \_\_\_\_\_ ) \_\_\_\_\_ E-mail (Required) \_\_\_\_\_

*Customers are responsible in providing correct and accurate shipping information when placing order to avoid payment for a replacement order if original is not received.*

Hard Copy Study Materials	<i>Shipping &amp; handling costs are included in pricing below.</i>		ANFP Member	Non-Member
[ ] Credentialing Exam Study Guide, 6 <sup>th</sup> edition ©2016 (SG16)			\$ 77.00	\$ 87.00
[ ] CDM Exam Review Flash Cards ©2016 (FLASH12)			\$ 27.00	\$ 32.00
[ ] Hard Copy Study Guide / Flash Cards <i>Value Bundle</i> (BDL4)			\$ 89.00	\$ 104.00
• Credentialing Exam Study Guide, 6th Edition ©2016				
• CDM Exam Review Flash Cards ©2016				
[ ] Nutrition Fundamentals and Medical Nutrition Therapy, 2 <sup>nd</sup> Edition ©2018 (TXT302)			\$ 110.00	\$ 140.00
[ ] Foodservice Management - By Design, 2 <sup>nd</sup> Edition ©2018 (TXT304)			\$ 115.00	\$ 145.00

## Online Study Materials

CDM Computer Based Practice Exam ©2016  
 \* To purchase, visit <https://store.lxr.com/product.aspx?id=1461>.

Only available through AMP Store. Use link to the left or refer to Page 2 of this brochure for details.

Only available through AMP Store. Use link to the left or refer to Page 2 of this brochure for details.

CDM Certification Exam Online Review Course ©2016 (OC44) To purchase, visit <a href="http://www.ANFPonline.org/market">www.ANFPonline.org/market</a> .	\$ 120.00	\$ 130.00
Order Subtotal	\$ _____	\$ _____
Sales Tax (Illinois residents only: add 8%)	\$ _____	\$ _____
Total Amount Due	\$ _____	\$ _____

*Please note that study materials are non-refundable. Any shippable items returned to sender are subject to a non-refundable 10% handling fee. Your cancelled check or credit card statement serves as your receipt.*

PLEASE RETURN THIS FORM WITH YOUR PAYMENT TO:

Association of Nutrition & Foodservice Professionals  
 406 Surrey Woods Drive  
 St. Charles, IL 60174  
 Phone: 800.323.1908 or 630.587.6336  
 Fax: 630.587.6309

FOR OFFICE USE ONLY

Date \_\_\_\_\_  
 Check or Auth. # \_\_\_\_\_  
 AMT \_\_\_\_\_

### Method of payment:

[ ] Check [ ] Money Order (Please make check or money order payable to ANFP)  
 [ ] VISA [ ] MasterCard [ ] American Express [ ] Discover Amt. to charge \$ \_\_\_\_\_

Cardholder's name \_\_\_\_\_  
 Cardholder's signature \_\_\_\_\_  
 Phone number \_\_\_\_\_  
 Number on card\* \_\_\_\_\_ \*\*CVV# \_\_\_\_\_ Expiration date (MO/YR) \_\_\_\_\_ / \_\_\_\_\_

Cardholder information: [ ] Check here if same as above

Billing address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

\* Only cards from US banks are accepted  
 \*\* The CVV Code is the 3 or 4 digit security code located on the front or back of your credit card.