

Control Sheet

1009 Cork Drive
Bethel Park, PA 15102
800.545.1110



SCHOOL NAME _____

MR. MRS. MS. _____
FACULTY ADVISOR FIRST NAME LAST NAME

STREET ADDRESS _____

ADVISOR E-MAIL (REQUIRED) _____

CITY STATE/PROVINCE ZIP/POSTAL CODE

SPONSORING CLUB/ORGANIZATION _____

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PHONE (DAY) EXT. PHONE (EVE)

X
ADVISOR SIGNATURE (REQUIRED)

()
FAX (REQUIRED) EXPECTED SALE DATE School Purchase Order
(only if required by school)

Your cost is based on the number of students filling out a questionnaire -- NOT the number of reports you sell.

LGBTQ Option New this year!

OPTIONS FOR ALL PROGRAMS

Gender Matches (Must Choose One ONLY)

Both Same and Opposite Gender - gender identified
If nothing is checked, the first option will be provided

Opposite Gender Only

LGBTQ (New!) - no gender identified

"Compatibility" Matches (Must Choose One ONLY)

Best Matches Only (10-15 will be shown)

Also Show 5 "Unlikely" Matches
If nothing is checked, Best AND Unlikely will be shown.

Grade Range Participating (Must Choose One ONLY)

9-12 7-9 6-8 College

Submit separate order for each. Will not match Middle School & High School.

Other Options

Print "Sponsored By" on Reports

Choose ONE Program Option Only

option 1

fill out questionnaires
on-line

**Fax this form
800-545-1110**

Receive PDF files by e-mail
print reports
at school

40¢ per student

I want this one

Number of survey keys needed for student logins

Questionnaire _____

Last day for survey completion ____/____/____

(CANNOT be earlier than 2nd calendar day prior to start of sale)

option 2

**Due to COVID-19
only Option 1
will be available
for 2020-2021**

**\$50
Minimum
per order**

Your cost is based on the number of students filling out a survey, NOT the number of reports you sell. Your pricing should be based on a per-student charge.

IMPORTANT

NUM _____
PM _____
Q _____
ENT _____

Data Match Office Use Only