

**Notice to Military and government purchasers:**

Active Relationships Center has been awarded a GSA Schedule Contract and purchases may also be made through the GSA website. Active Relationships Center's GSA Schedule Contract number is GS-02F-0032W. The pricing on this website and the GSA website are identical.

<b>Active Military Life and Resiliency Skills MILITARY Product Price List</b>		<b>Price/Unit</b> FOB Destination within the USA	<b># of units</b>	<b>Subtotal</b>
<b>Certification-Out-of-the-Box (COOB) Kit</b>				
PR 406	<b>Training Certification Kit:</b> Training at a Distance Includes: (1) Participant Book (1) Leader's Guide with Training DVD's, Power Point CD and SMART Resolution Demos DVD <i>(Can substitute Secular Participant Book for Christian version)</i>	\$392.33/kit		\$
<b>Leader's Guide *(Leaders who are already certified)</b>				
PR 200	<b>Leader's Guide:</b> Includes: Power Point, SMART Resolution DVD's, & Training DVD's	\$204.62/ guide		\$
<b>Participant Book (one book per couple or single participant)</b>				
PR 150-A	Secular version (1-49 Books)	\$35.40/bk		\$
PR 150-B	Secular version (50 Books or more ordered at the same time)	\$29.10/bk		\$
PR 174-A	Christian version (1-49 Books)	\$35.40/bk		\$
PR 174-B	Christian version (50 Books or more ordered at the same time)	\$29.10/bk		\$
<b>Teaching Aids *(for Leaders who are already certified)</b>				
PR 250	Training DVDs	\$204.62/set		\$
PR 309	PowerPoint CD	\$70.32/CD		\$
PR 501	S.M.A.R.T. Resolution Demonstrations DVD	\$22.74/DVD		\$
<b>Grand Total:</b>				\$ _____

**To order ACTIVE RELATIONSHIPS Programs: Call: 877-724-7789 or FAX: (214) 369-4914**  
**Or Order Online: [www.ActiveRelationships.com](http://www.ActiveRelationships.com);**  
<http://www.activerelationships.com/MilitaryProducts.htm>

<b>Bill To: (must be same as credit card)</b>	<b>Ship To: (if different than Bill To address)</b>
Name: Company: Address: Address 2: City: State/Province:                      Zip: Country: Phone: Fax: E-mail: Class Date(s) Desired: APO Location: Submitted under GSA Schedule? ___ Yes ___ No	Name: Company: Address: Address 2: City: State/Province:                      Zip: Country: Phone: Fax: E-mail: Class Date(s) Desired: APO Location: