NHPCO MARKETPLACE ORDER FORM

Name _____

Organization _____

Mailing Address (No PO Boxes) _____

City _____ State _____ Zip _____

Phone _____ Fax _____

E-mail _____ Are you a member? ❒ Yes ❒ No Member #_____

TITLE/ITEM #	PRICE	QUANTITY	TOTAL

Order Subtotal	
Shipping & Handling**	
Sales Tax 6% (VA residents)*	
TOTAL DUE	

PAYMENT OPTIONS (All orders are pre-paid)
Please note that all orders must be paid in full prior to fulfillment.

❒ Check payable to "NHPCO" enclosed.
(Payment must be in U.S. dollars and drawn on a U.S. bank)

❒ Please charge my credit card: ❒ VISA ❒ MasterCard ❒

CARD NUMBER / EXP. DATE / CVV

NAME OF CARDHOLDER (PRINT)

AUTHORIZED SIGNATURE

***SALES/USE TAX** We are required to collect sales/use tax for VA residents. VA residents add 6%. To claim exempt status, please include the following:

❒ My exemption number is _____

❒ Enclosed is a copy of my certificate.

GUARANTEE If you are not completely satisfied with any item purchased, you may return it in original condition within 30 days of receipt for a full refund, minus shipping and handling.

****SHIPPING & HANDLING** Orders up to $1,500: Enter $7.00; Orders over $1,500: Enter $15.00 For international and expedited shipping please contact NHPCO's Solution Center to place order.

FOR RUSH DELIVERY OPTIONS Call 800-646-6460

Please note that all prices are not guaranteed and may change at any time.

4 EASY WAYS TO ORDER

ONLINE
www.nhpco.org/marketplace

PHONE
800-646-6460

FAX
Fax the order form toll free to 703-837-1233

MAIL
Mail completed order form to:

NHPCO Marketplace
1731 King Street
Alexandria, VA 22314

NHPCO
Leading Person-Centered Care