

Communication Disorders Software Order Form

Name:

Organization:

Address1:

Address2:

City:

State:

Zip:

Country:

Phone:

Email:

Select the software package(s) you wish to order:

Speech Intelligibility Test – Clinical Package (\$250 for one site license)

Speech Intelligibility Test – University Package (\$350 for 5 site licenses)

Payment Method

When ordering, add \$10.00 for postage within the U.S if you want the software on a flash drive. Due to covid postal restrictions, we are unable to ship internationally. There are no shipping charges for the electronic version.

Payment Method: Check Visa MasterCard Purchase Order

Credit Card #: Exp. Date: CVV:

Name on Credit Card:

Credit Card Approval Signature:

Please complete this form, print it, and then mail it with payment or Purchase Order to:

Madonna Rehabilitation Hospital
Attn: Kim Hamik
5401 South St
Lincoln, NE 68506

Make checks payable to Madonna Rehabilitation Hospital.
Payment must be in US dollars. Visa or MasterCard registrations
are accepted by mail, phone or fax.