

XYZ Company Of Texas

12345 Capitol Way
Any Town, Texas 78888

HEARING INSTRUMENT CONTRACT

Phone: 512.888.8888
Fax: 512.888.8899

CONTRACT ADDENDUM ~ INSTRUMENT DELIVERY

Name:

Date of Delivery:

30 Consecutive Day Trial Period Ends on

Right Ear Make:	Model:	Serial #:	<input type="checkbox"/> New <input type="checkbox"/> Used <input type="checkbox"/> Reconditioned
Left Ear Make:	Model:	Serial #:	<input type="checkbox"/> New <input type="checkbox"/> Used <input type="checkbox"/> Reconditioned

It is recommended that a follow-up appointment be scheduled within 30 days after the hearing instrument(s) fitting.

Purchaser:	Date:
Licensee's/Permit Holder's Signature:	TX License/permit #:
Licensee's Print Name:	
Supervisor's Name: (if applicable)	TX License & Type: #

Please note: you may add anything that you want the customer to know as to care and maintenance of the hearing instruments or necessary follow-up information.