

NCQA ORDER FORM

How to Order

Telephone: Call NCQA Customer Support at 888-275-7585 with your credit card information.

Mail: Mail this form with your check (payable to NCQA in U.S. funds) to: NCQA, Department 4038, Washington, DC 20042-4038. If you are sending a payment overnight, send to: NCQA, 1100 13th Street, NW, Suite 1000, Washington, DC 20005

Fax: Fax this form with your credit card information to 202-955-3531.

Online: Order online at www.ncqa.org/publications.

Name First _____ Last _____ Degree (e.g., RN, MD, PhD) _____

Organization _____ Title _____

Street Address (Home/Work) _____

City _____ State _____ Zip _____

Phone _____ Fax _____

E-mail _____

If ordering an e-pub or Web-based product, identify the primary user, if different from above.

Name _____ E-mail _____

I would like to order the following items:

Qty	Item#	Description	Price (each)	Discount	Total

Shipping and handling must be included in all orders.
 All orders are shipped by UPS Ground Service unless Next Day Service is requested. Please allow 5 to 7 business days for delivery. Shipping and handling charges are for UPS domestic orders only. UPS and Federal Express do not deliver to P.O. boxes. For international orders, call 202-955-3500 for non-domestic rates. There is no shipping and handling charge for e-pubs, Web-based products and Quality Compass.

Shipping and Handling Rates (Print editions)

\$25 or less	\$10
\$26-\$75	\$12
\$76-\$100	\$14
\$101-\$300	\$18
\$301-\$500	\$22
\$501-\$700	\$28
\$701-\$900	\$34
\$901-\$1,200	\$40
\$1,201-\$1,500	\$46
\$1,501 and over	.3% of the order total

Next Day Service/Overnight Delivery

First 2 publications	\$50
Each additional 2 publications	\$45

Subtotal (Print Editions)	
Subtotal (E-Pubs)	
Total	
Sales Tax (MD 6% and DC 6% ONLY)	
Shipping & Handling (Hard Copies Only)	
Next Day Service (See Rates in Box)	
GRAND TOTAL OF ORDER	

Method of payment

Check Enclosed Ck# _____ Amount \$ _____

Credit Card (Check One) Visa MasterCard AMEX Diner's Club

Credit Card Account # _____ Expiration Date ____ / ____

Name on Card (Please Print) _____