Fill-in and Mail or FAX Order to:



Hemodialysis, Inc. (Hi)

710 West Wilson Avenue Glendale, CA 91203-2409 Voice: 818-500-8736 ◆ Facsimile: 818-500-9452

First Name:	Home Phone:
Last Name:	E-mail address:
Street Address:	License/Certificate #:
Apt.:	State of Licensure:
City:	Last 4 digits SSN:
State:	Date of Post Test:
Zip code:	
Title (circle):	RN LVN PCT CHT MD PhD Other:

*SS# ONLY if your state does not require a certification or license number

ITEM	QTY	Price	Mailing Shipping/Handling	CA Tax*	Subtotal
Principles of Dialysis		\$120.00	\$15.00	\$10.80	
Dialysate		\$120.00	\$15.00	\$10.80	
Blood and Uremia		\$120.00	\$15.00	\$10.80	
Monitors in Hemodialysis		\$120.00	\$15.00	\$10.80	
Hemodialysis Nursing Syllabus		\$230.00	\$15.00	\$20.70	
Total Amount for all items \$: *California Residents only; sales tax 9.0%					

Special Items

FedEx Mailing, only in USA. Add fifty dollars (\$50.00)	\$50.00
□ Special Handling, only in USA. Add fifty dollars (\$50.00) if you need the 30 Contact Hour Certificate <i>in less than 4 weeks.</i>	\$50.00
□ International Shipping. Call 818-500-8736 for rates.	
GRAND TOTAL:	

Method of Payment

Check— Payable to Hemodialysis, Inc. Allow 10 days for check to clear.

U VISA

MasterCard

Credit Card # Card # _ _ _ / _ _ _ / _ _ _ / _ _ _ Exp. _ / _ _ _ Exp. _ / _ _ _

Signature

NOTE: Prices subject to change without notice. USA prices.