



Company Name: _____

Person Completing Form _____

Print Name

Signature

Please select ONE of the following that best describes your organization.

Clinical Hospital	
<input type="checkbox"/>	Clinical General Hospital (<250 beds)
<input type="checkbox"/>	Clinical General Hospital (250-500 beds)
<input type="checkbox"/>	Clinical General Hospital (500-800 beds)
<input type="checkbox"/>	Clinical General Hospital (800+ beds)
<input type="checkbox"/>	Clinical University Hospital
Clinical Laboratory	
<input type="checkbox"/>	Clinical National Ref Lab
<input type="checkbox"/>	Clinical Regional Ref Lab
<input type="checkbox"/>	Clinical Local Ref Lab
<input type="checkbox"/>	Clinical Office Lab (POL, on-site)
<input type="checkbox"/>	Clinical Lab Buying Group (e-intermediary)
Clinical Veterinary Clinic	
<input type="checkbox"/>	Clinical National Veterinary Clinic
<input type="checkbox"/>	Clinical Regional & Local Veterinary Clinic
Clinical Federal Government (CFG)	
<input type="checkbox"/>	Clinical CFG Labs
<input type="checkbox"/>	Clinical CFG Animal/Veterinary Labs
<input type="checkbox"/>	Clinical CFG VA
<input type="checkbox"/>	Clinical CFG Hospital (DOD, Civilian)
Clinical State and Local Government (CSL)	
<input type="checkbox"/>	Clinical CSL Public Health Services and Labs
<input type="checkbox"/>	Clinical CSL Military
Industrial Food	
<input type="checkbox"/>	Industrial Meat & Poultry
<input type="checkbox"/>	Industrial Vegetable, Grains, and Nuts
<input type="checkbox"/>	Industrial Dairy
<input type="checkbox"/>	Industrial Food Other
Industrial Personal Care	
<input type="checkbox"/>	Industrial Cosmetics
<input type="checkbox"/>	Industrial Personal Care Other

Industrial Medical	
<input type="checkbox"/>	Industrial Pharmaceutical
<input type="checkbox"/>	Industrial Biotech
<input type="checkbox"/>	Industrial Medical Device Manufacturer
Industrial Beverage & Brewing	
<input type="checkbox"/>	Industrial Brewing
<input type="checkbox"/>	Industrial Beverage & Brewing Other
<input type="checkbox"/>	Industrial Bottled Water
Industrial Private Contract Lab & Research Institute	
<input type="checkbox"/>	Industrial Private Contract Lab & Research Institute
Industrial Education (University & College)	
<input type="checkbox"/>	Industrial Education (University & College)
Industrial Other	
<input type="checkbox"/>	Industrial Other
Industrial Environmental	
<input type="checkbox"/>	Industrial Environmental Water (Industrial)
<input type="checkbox"/>	Industrial Environmental Other
Industrial Federal Government (IFG)	
<input type="checkbox"/>	IFG Environment
<input type="checkbox"/>	IFG Testing & Research
<input type="checkbox"/>	IFG Education & Training
Industrial State and Local Government (ISL)	
<input type="checkbox"/>	ISL Environment
Distributor	
<input type="checkbox"/>	Distributor - General
<input type="checkbox"/>	Distributor - Clinical
<input type="checkbox"/>	Distributor - Industrial
<input type="checkbox"/>	Distributor - POL
<input type="checkbox"/>	Distributor - Veterinary
<input type="checkbox"/>	Distributor - Government
<input type="checkbox"/>	Distributor - Freight Forwarder

Please complete this form and fax it to 800-447-5761. For help completing this form, contact Customer Support at 800-255-6730.