REQUEST FOR BROCHURES

Please allow 2 weeks for receipt of order. If you are about to run out of brochures, please photocopy a brochure to give to your patients until you receive your new supply. Fax your request to 850-922-5369. Additional brochures may be ordered as needed at no charge.

**Brochures are sent by FedEx ground and can not be delivered to a P.O. Box. Please be sure to include your name and/or department.**

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Participating Doctor’s Name: ____________________________

Medical License Number: ________________________________

Name of Hospital or Medical Office: _________________________

Delivery Address: _____________________________________

City: __________________________ State: _________ Zip: ______

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You may download this form at [www.nica.com](http://www.nica.com) under Participating OBGYNS- Forms & Brochures or under Hospitals – Forms & Brochures.