

Telephone: +44 (0)1932 690325
 Fax: +44 (0)1932 341091
 Web: www.specialproducts.biz
 Email: info@specialproducts.biz



Training Material Request

Name:

Position / Title:

Dept. / Hospital / Company Name:

Business Address:

.....

Postcode: **Telephone No. :**

Professional email Address:

Professional Registration No. (e.g GMC, RSPGB, NMC, GDC):

ITEM(S) REQUIRED:			
Items Available	Epistatus		
	Items Required (Please tick)	Quantity Required	Code
Demonstration Pack – 5ml Bottle (Max. 10)	<input type="checkbox"/>		X01
Demonstration Pack – Pre-filled Syringe (Max. 10): 10mg in 1.0ml	<input type="checkbox"/>		Y05
Pre-filled Syringe Information Leaflet	<input type="checkbox"/>		
Training DVD	<input type="checkbox"/>		X02
Training Syringes / Syringe Caps	<input type="checkbox"/>		Y01/X06
Administration Guide – Adult	<input type="checkbox"/>		X17
Administration Guide – Paediatric	<input type="checkbox"/>		X15/X27
Data Sheets	<input type="checkbox"/>		
Emergency Medication Booklet	<input type="checkbox"/>		X22
Good Sleep Guide	<input type="checkbox"/>		X28
Please contact me regarding details of SPL's Training Services	<input type="checkbox"/>		
Information Request:	Melatonin	<input type="checkbox"/>	
Other:			

I understand that these items are free of charge, and are for training purposes only

Signature

Date: