

RESPIRATORY CARE DIGITAL SUBSCRIPTION ENROLLMENT FORM

INSTITUTIONAL SUBSCRIPTIONS

1 year (12 digital issues) - \$199.00

2 years (24 digital issues) - \$330.00

3 years (36 digital issues) - \$475.00

**An Institutional Subscription offers Username/Password access for (1) user account only.*

IP ACCESS ONLY

<u>IP Access</u>	<u>Cost</u>	<u>Selection</u>
1 year IP Access	\$600	_____
2 years IP Access	\$1100	_____
3 years IP Access	\$1600	_____

**An IP access subscription offers online access to multiple end users.*

Agency Discount: 15% discount allowed to subscription agencies for Institutional and IP rates.

**Mail payments to:
Daedalus Enterprises
PO Box 676721
Dallas, TX. 75267-6721**

For more information, please email info@aacrc.org
Phone: 972-243-2272
Fax: 972-484-2720

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Dallas, TX. 75267-6721
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RESPIRATORY CARE Digital Subscription Enrollment Form

Please note, if you are a current subscriber to *RESPIRATORY CARE*, you may also use this form to submit payment for renewal. If this is a renewal, please provide your subscriber I.D number:

Name: _____ Job title: _____

Facility Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____ Country: _____

Telephone: _____ Fax: _____ Email address: _____

Select your subscription type:

Institutional IP Access Only

Select your subscription duration:

1 year 2 years 3 years

Your total payment: \$ _____

Payment Information

Check (must be mailed to the P.O Box address at the top of this form)

If paying by credit card, please fax this form or email as an attachment. Never put credit card information into the body of an email; it is not secure. We do not accept purchase orders.

VISA Master Card American Express Discover

Credit Card # _____ Expiration Date: _____

Signature of Card Holder: _____