# P&Ps Update Subscription

Date of Order: _____

Contact Name: _____

Contact Email and Title: _____

Alternate Contact Name: _____

Alternate Contact Email and Title: _____

Hospice Name: _____

_____ Mailing Street Address

_____ Telephone

_____ City / State / Zip

_____ Fax

## P&P Update Subscription

*Purchase of Weatherbee Policies & Procedures must be on file or accompany all orders*

☐ We have purchased Weatherbee Policies & Procedures volume(s); please send us updates for 2 years for $150

Any updates during the 2-year subscription period will be emailed to the two contacts listed above.

**All orders must be pre-paid**

☐ **CHARGE**: ☐ Amex ☐ MasterCard ☐ Visa

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| | | | | | | | | | | | | | | | |

Total due: _____

Exp Date: ☐☐ ☐☐☐☐ Security Code: ☐☐☐☐

Name on Card: _____

☐ **CHECK** enclosed payable to: Weatherbee Resources

Mail completed form(s) and check to:
Weatherbee Resources
14 E Church Street, Headland, AL 36345

**To Order:**
Call: (866) 969-7124 (Mon - Fri 8 to 5 CST)
Fax: 508-778-8899
Mail: 14 E Church Street
Headland, AL 36345
Online: www.weatherbeeresources.com/products

**www.weatherbeeresources.com**