

OCUTECH®

Vision Enhancing Systems

Ocutech Loaner Program Application

The goal of the Ocutech's Loaner program is to allow clinicians to become familiar with Ocutech devices and determine whether they may be a valuable addition to their low vision practice. We encourage low vision specialists to schedule several prospective patients during the loaner period so you may experience a range of responses from your patients as well as become comfortable with the fitting, demonstration and ordering of the devices. Ocutech offers special pricing for demonstrator equipment so that the revenue from just one Ocutech prescription will be sufficient to purchase your own diagnostic kit that will be available permanently in your practice. Feel free to call us or simply fill out the loaner application form and fax it back to us. We look forward to welcoming you as an Ocutech prescriber.

Please select the loaner kits for device(s) you request

VES-II VES-K VES-Mini VES-Sport Image Minifier

Please complete and fax back to Ocutech at (919) 967-8146

Clinic Name: _____	Contact Person: _____
Doctor's Name: _____	
Address: _____ _____	
Telephone: _____	Fax: _____

Shipping/handling charge: Depending upon which and how many kit(s) are being rented, there will be a charge between \$40 - \$50 that covers both shipping/handling to you and product return to Ocutech.

All shipping fees will be charged to your credit card: VISA MasterCard American Express

Credit Card # (required): _____ Security Code _____ Exp Date _____

Name on card: _____

Signature of card holder: _____

Note: Your card will be charged for shipping/handling upon receipt and inspection of loaners at Ocutech.

Important: Please check all that apply:

- Our clinic currently prescribes bioptic telescopes.
- Our clinic does not currently prescribe bioptic telescopes.
- Please contact our clinic for instruction and training for use of Ocutech products.

(For Ocutech Office use):

Date to Receive: _____

Return Date: _____

Important! Please Read

Our loaner systems are issued for **two (2) weeks of use** at your clinic unless otherwise specified. We will arrange for a **pickup**. Please have the device(s) packaged and ready to be picked up by the scheduled pick-up date. Please read all accompanying literature to insure proper handling and use of the systems. Any charges incurred due to damage to the system resulting from misuse or improper handling are the responsibility of the borrower and will be charged to the above credit card number or billed to the borrower. We welcome calls to our Professional Support Department at 800-326-6460.