



PREGNANCY TEST/VITAMIN ENROLLMENT FORM

DO NOT TRY TO EDIT THIS FORM IN YOUR BROWSER!!! Newer browsers such as Google Chrome and Microsoft Edge will allow you to fill out the form, but will not save the data. To avoid having to redo your work, please open and edit this PDF in Adobe Acrobat Reader (free is fine). Most computers have it installed or you can download it here: <https://get.adobe.com/reader>

1. Center's Information

Center's Name: _____ Contact Person: _____
 Telephone Number: _____ Title: _____
 Fax Number: _____ E-Mail Address: _____
 Billing Address: _____ Shipping Address: _____
 Billing City: _____ Shipping City: _____
 Billing State: _____ Zip: _____ Shipping State: _____ Zip: _____

2. Select Monthly Test Usage to Determine Price (Mix and Match Boxes & Bags of Tests & Vitamins)

For mix and match, add the number of tests you receive per month plus the number of bags of vitamins. The total is the discount you will receive on both. For example, if you order 2 boxes of tests and 2 bags of vitamins per month, you will receive the 4 price on both!

Tests Used Per Mo.	12-13	25	50	75	100	125	150	175	250+
Price Per Test	\$1.32	\$1.20	\$1.08	\$1.00	\$.92	\$.88	\$.84	\$.80	\$.76
Test Cost Per Month	\$33.00	\$30.00	\$27.00	\$25.00	\$23.00	\$22.00	\$21.00	\$20.00	\$19.00
Boxes Per Month	1 every other mo.	1	2	3	4	5	6	7	10+
Cost Per Month	\$16.50	\$30.00	\$54.00	\$75.00	\$92.00	\$110.00	\$126.00	\$140.00	\$190.00

Vitamins Used Per Mo.	15	30	60	90	120	150	180	210	300
Price Per Vitamin "Pouch"	\$1.60	\$1.50	\$1.40	\$1.30	\$1.20	\$1.15	\$1.10	\$1.05	\$.99
Cost per Bag (30 pouches)	\$48.00	\$45.00	\$42.00	\$39.00	\$36.00	\$34.50	\$33.00	\$31.50	\$29.70
Bags (30 pouches) Per Mo.	1 every other mo.	1	2	3	4	5	6	7	10+
Cost Per Month	\$24.00	\$45.00	\$84.00	\$117.00	\$144.00	\$172.50	\$198.00	\$220.50	297.00

3. Payment Details

Select your preferred method of payment to get started on your monthly shipments!

 Visa/Master Card/Discover Number Expiration Date: Security Pin:

Sign Here if you want to be billed.

For the period of one year, please ship us ___ boxes of tests and ___ bags of vitamins

per Month Quarter

Starting shipments on _____ / _____
month year

Boxes of Tests Per Month / Quarter _____

Test Cost Per Month / Quarter \$ _____

Bags of Prenatal Vitamins Cost Per Month / Quarter \$ _____

Prenatal Vitamins Cost Per Month / Quarter \$ _____

Shipping
1-2 boxes \$5.50 3-4 boxes \$7.95 \$
5-9 boxes \$10.95 10+ boxes \$12.95 _____

Total Cost Per Month / Qtr \$ _____

4. Life Affirmation Statement | Please email completed forms to help@hh76.org.

I verify that our organization does not perform, recommend, or refer our clients for abortion.

 Signature Printed Name Position Date