

# Pearson Clinical Assessment

If you are not a Registered Test User please complete our online registration form before ordering. Test user registration can be completed at [www.pearsonclinical.com.au/register](http://www.pearsonclinical.com.au/register). Orders are filled on the understanding that copyright will be protected by the user.

**Complete and fax your order to +61 2 9261 4975 OR email to [info@pearsonclinical.com.au](mailto:info@pearsonclinical.com.au)**

## CUSTOMER DETAILS

Do you wish to place this order on your Customer Account? YES  NO  If YES, Account No.: \_\_\_\_\_

Do you have a purchase order number? YES  NO  If YES, please attach your Purchase Order to this form

Name of Registered Test User: \_\_\_\_\_

Deliver my product attention to: \_\_\_\_\_

Organisation Name: \_\_\_\_\_

Organisation Address (street address please): \_\_\_\_\_

Phone: ( ) \_\_\_\_\_

Fax: ( ) \_\_\_\_\_

Email: \_\_\_\_\_

## PROMOTIONAL CODE (IF APPLICABLE):

ISBN	PRODUCT TITLE	QTY	RRP\$ (incl GST)	TOTAL PRICE
<b>Product Subtotal</b>				
<b>Plus Freight &amp; Handling:</b>				
Australia: 7.5% of product subtotal to a maximum of A\$75 (includes GST)				
New Zealand: 10% of product subtotal to a maximum of NZ\$100 (includes GST)				
<b>Total Payable:</b>				
(Add product subtotal with freight & handling fee)				

## PAYMENT DETAILS

Customers paying by credit card or cheque, please complete the details below.

Cheque (Please make payable to Penguin Australia Pty Ltd and mail to 151 Castlereagh Street, SYDNEY NSW 2000)

Enclosed is my cheque for \$ \_\_\_\_\_

Credit Card

I wish to pay by  MASTERCARD  VISA  AMEX

Card No.: \_\_\_\_\_

Expiry Date: \_\_\_\_\_

CCV\*: \_\_\_\_\_

Name (as on card): \_\_\_\_\_

Signature: \_\_\_\_\_

\* Card Validation Code is a 3 or 4 digit code printed on the back signature panel of your card.

GST is included on all goods and services for deliveries within Australia and New Zealand. Prices are subject to change without notice.

### Pearson Clinical Assessment Australia • Customer Care

Toll free – Australia: 1800 882 385 | Toll free – New Zealand: 0800 942 722 | Fax: +61 2 9261 4975

All enquiries: [info@pearsonclinical.com.au](mailto:info@pearsonclinical.com.au)



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