

INTERNET ACCOUNT ACCESS FORM

Hospital/Trust Name

Promedics Account Number

Contact Name

Department

Email Address

Telephone Number

I hereby confirm that we require secure Internet Access to our Promedics Orthopaedic Ltd account via the www.promedics.co.uk website. All orders placed by this login will be ssubject to the normal Terms & Conditions of Sale issued by Promedics Orthopaedic Ltd (copy available upon request).

Signed

Date

Please complete this form and return to john.gemmell@promedics.co.uk or fax to 01475 746410.

Your application will be processed ASAP and you will receive your login and password details shortly.