

WebPath® Version 17 - Site License Order Form

Your Institution: _____

Contact Person: _____

Your Address: _____

E-mail address: _____

Telephone: _____ Fax: _____

Ordering:

Number of site licenses _____ X \$395.00 each = \$ _____

Upgrade from WebPath® 15, 16 X \$75 each = \$ _____

Georgia residents add 4% sales tax (\$15.80) \$ _____

Total \$ _____

Make checks, money orders, or purchase orders (in U.S. dollars) payable to: Mercer University

Method of Payment: Check or Purchase Order # _____

Name and Address _____
of Cardholder _____
(if different from _____
above - please print) _____

Visa MasterCard Card # _____

Signature _____ Expiration _____

Either fax this form with credit card information to +1 912-721-8268 or e-mail or mail the completed form (with credit card information or payment) to the following address:

WebPath c/o Dr. Klatt
klatt_ec@mercer.edu
Mercer University Health Sciences Center
1250 E. 66th St
Savannah, GA 31404 USA