

# New Mexico EMS Video Loan Program Membership Agreement Form

Please mail form and payment to: EMS Region III, PO Box 1895, Clovis NM, 88102-1895

## MEMBERSHIP...

### 1. Tell us about your organization (PLEASE PRINT CLEARLY):

Name of Organization \_\_\_\_\_  
Contact Person \_\_\_\_\_  
Mailing Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Daytime Phone Number \_\_\_\_\_  
Email Address \_\_\_\_\_

### 2. What fee will you be paying? Please check appropriate box:

\$200.00 (member pays return postage)       \$275.00 (member pays no postage)

### 3. How will you be paying? Please check appropriate box:

Check       PO (must be attached)       Money Order       VISA       Mastercard

### 4. Purchase Order Information (PO must be attached to form):

Paying Agency \_\_\_\_\_  
Contact Person for Billing \_\_\_\_\_  
Billing Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Daytime Phone Number \_\_\_\_\_  
Purchase Order Number \_\_\_\_\_

### 5. Credit Card Information (must be completed if using credit card):

Name of Cardholder \_\_\_\_\_  
Credit Card Number \_\_\_\_\_  
Expiration Date \_\_\_\_\_

## AGREEMENT...

**PLEASE READ CAREFULLY**

#### **As a member of the New Mexico EMS Video Loan Program, we understand that:**

- Our membership fee of \$200.00 covers January 1 - December 31, 2017 and member/service pays return postage.
- Our membership fee of \$275.00 covers January 1 – December 31, 2017 with postage paid both ways.
- Our service can order an unlimited amount of videos, but only two videos can be checked out at one time.
- If for some unexpected reason the videos cannot be returned on time, EMS Region III will be contacted immediately.
- If the call is not made, our service will pay a late fee of \$1.00 per day - for up to one month after the due date.
- If the video is not returned after one month, we agree to pay the late fee and the price to replace the video. (Replacement cost will depend on the video, ranging from \$100 to \$700 per video.)
- Orders will not be shipped to members with past due videos.

#### **As the contact person for our service:**

- I agree to be the point of contact with EMS Region III.
- I will be the person to order the videos, contact EMS Region III concerning any delays, and be responsible for the return of the videos and exams.
- I will distribute the CEs to the participants.
- If I can no longer serve as the contact person, I will notify EMS Region III immediately.

\_\_\_\_\_  
**Contact Person's Signature**

\_\_\_\_\_  
**Date**