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)
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
	Expiration Date
Δ	GREEMENT
_	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, 2020 and member/service pays return postage.
•	Our membership fee of \$275.00 covers January 1 – December 31, 2020 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.
	athe 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 retu
	of the videos and exams.

If I can no longer serve as the contact person, I will notify EMS Region III immediately.

I will distribute the CEs to the participants.