



# OPEN FIT ORDER FORM

P.O. Box 829 Hopkins, MN 55343

637 12<sup>th</sup> Ave. South Hopkins, MN 55343

Toll Free: 1-800-322-8238 Local [952] 908-7654 Fax [952] 908-7661

Website: [www.PrairieLabs.com](http://www.PrairieLabs.com) Email: [Sales@PrairieLabs.com](mailto:Sales@PrairieLabs.com)

## Prairie Labs Inc.

Account #	Tel #	Amount Enclosed	Check #	Date																																																																																																																					
Dealership Name & Address		Shipping Address																																																																																																																							
Patients Name		<b>Patients Hearing Information</b>																																																																																																																							
<b>MODEL</b> <input type="checkbox"/> <b>Independence</b> (Premium Open Fit) (10A Battery W/ Flex Strip Programming) <input type="checkbox"/> <b>Revolution</b> (Receiver In Canal) (10A Battery W/ Flex Strip Programming) <input type="checkbox"/> <b>Freedom 4</b> (Open Fit) (10A Battery W/ Flex Strip Programming) <input type="checkbox"/> <b>Liberty</b> (Convertible OTE/BTE 13 Battery W/ Socket Programming) <input type="checkbox"/> <b>Monarch</b> (Convertible OTE/BTE 10A Battery W/ Rt. Battery Insert Programming) <input type="checkbox"/> BTE with Ear Hook (Liberty & Monarch only) <input type="checkbox"/> Open Fit Version		<table border="1"><thead><tr><th></th><th>125</th><th>250</th><th>500</th><th>1K</th><th>2K</th><th>4K</th><th>8K</th><th></th></tr></thead><tbody><tr><td>0</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>LEFT: SRT _____</td></tr><tr><td>10</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>MCL _____</td></tr><tr><td>20</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>UCL _____</td></tr><tr><td>30</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>Score _____</td></tr><tr><td>40</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>50</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>RIGHT SRT _____</td></tr><tr><td>60</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>MCL _____</td></tr><tr><td>70</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>UCL _____</td></tr><tr><td>80</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>Score _____</td></tr><tr><td>90</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>100</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>HL SPL</td></tr><tr><td>110</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td><input checked="" type="checkbox"/> <input checked="" type="checkbox"/></td></tr></tbody></table>				125	250	500	1K	2K	4K	8K		0								LEFT: SRT _____	10								MCL _____	20								UCL _____	30								Score _____	40									50								RIGHT SRT _____	60								MCL _____	70								UCL _____	80								Score _____	90									100								HL SPL	110								<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
	125	250	500	1K	2K	4K	8K																																																																																																																		
0								LEFT: SRT _____																																																																																																																	
10								MCL _____																																																																																																																	
20								UCL _____																																																																																																																	
30								Score _____																																																																																																																	
40																																																																																																																									
50								RIGHT SRT _____																																																																																																																	
60								MCL _____																																																																																																																	
70								UCL _____																																																																																																																	
80								Score _____																																																																																																																	
90																																																																																																																									
100								HL SPL																																																																																																																	
110								<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>																																																																																																																	
<b>CASE COLOR</b> <b>Independence / Revolution / Freedom 4</b> <input type="checkbox"/> Beige <input type="checkbox"/> Cocoa Brown <input type="checkbox"/> Charcoal <input type="checkbox"/> Black <input type="checkbox"/> Gray <b>Liberty</b> <input type="checkbox"/> Beige <input type="checkbox"/> 2 Tone Beige Case with Brown Insert <b>Monarch</b> <input checked="" type="checkbox"/> Beige Only		<b>IMPORTANT:</b> PLEASE ENCLOSE AN AUDIOGRAM WITH ORDERS																																																																																																																							
<b>Independence Freedom 4, Liberty &amp; Monarch Tubes</b> (Side, Size & Quantity) <input type="checkbox"/> Right <input type="checkbox"/> 0B <input type="checkbox"/> 1B <input type="checkbox"/> 2B <input type="checkbox"/> 3B <input type="checkbox"/> Left <input type="checkbox"/> 0B <input type="checkbox"/> 1B <input type="checkbox"/> 2B <input type="checkbox"/> 3B <b>Independence / Revolution Receiver Units</b> (Side, Size & Quantity) <input type="checkbox"/> Right <input type="checkbox"/> 0B <input type="checkbox"/> 1B <input type="checkbox"/> 2B <input type="checkbox"/> 3B <input type="checkbox"/> Left <input type="checkbox"/> 0B <input type="checkbox"/> 1B <input type="checkbox"/> 2B <input type="checkbox"/> 3B <b>Standard Domes</b> (Size & Quantity) <input type="checkbox"/> Small <input type="checkbox"/> Medium <input type="checkbox"/> Large *See Reverse Side for Custom Ear Mold & Open Fit Mold Options *First Tube or Receiver Unit & Standard Dome Included at No Charge Additional Tubes, Receiver Units & Domes may be purchased including New Variable Domes		<b>FIRST ORDER PLEASE SEND</b> <input type="checkbox"/> Cable <input type="checkbox"/> Software <input type="checkbox"/> Manual <input type="checkbox"/> Fitting Tool *One of each included with first order, additional items can be purchased <b>ADDITIONAL CHARGEABLE OPTIONS</b> <input type="checkbox"/> Omni/Dir. Dual Mic (user selectable) <input type="checkbox"/> STD. T-Coil <input type="checkbox"/> AMP. T-Coil (Liberty Only) <input type="checkbox"/> STD. Auto T-Coil * <input type="checkbox"/> AMP Auto T-Coil * (Liberty Only) (No pushbutton with auto t-coils) Monarch available with Push Button only, no additional options available <b>Variable Dome:</b> (Adds up to 5dB to fitting range) (*Independence, Freedom 4, Liberty & Monarch) <input type="checkbox"/> Medium <input type="checkbox"/> Large *Auto T-Coil & Omni/Directional Mic cannot be combined																																																																																																																							
<b>WARRANTY &amp; SERVICE UPGRADES (Additional Charge)</b> <input type="checkbox"/> Two-Year Warranty (Loss & Damage Included) <input type="checkbox"/> 1-Day In-House Service <input type="checkbox"/> Same Day Service																																																																																																																									
<b>METHOD OF SHIPPING</b> <input type="checkbox"/> Free First Class Mail <input type="checkbox"/> FedEx Ground \$6.50 <input type="checkbox"/> FedEx 2 <sup>nd</sup> Day \$9.00 <input type="checkbox"/> C.O.D \$15.00 <input type="checkbox"/> Priority Mail \$6.00 <input type="checkbox"/> Ship To User \$7.00 <input type="checkbox"/> FedEx Standard Overnight – Actual Price <input type="checkbox"/> Insurance & Handling per aid \$4.00 <input type="checkbox"/> Express Account per aid \$14.00			Prairie Labs use only																																																																																																																						
<b>PLEASE SEND MORE</b> <input type="checkbox"/> Custom Production Forms <input type="checkbox"/> Repair Forms <input type="checkbox"/> Impression Boxes <input type="checkbox"/> Mailing Labels <input type="checkbox"/> BTE/Ear Mold Production Forms <input type="checkbox"/> FedEx Labels (Express Account Customers Only) *For your convenience you can now print all of our order forms off our website. <a href="http://www.prairielabs.com">www.prairielabs.com</a>																																																																																																																									
<b>SPECIAL INSTRUCTIONS</b>																																																																																																																									

Incomplete orders may delay processing; please verify information on mailing copy. Effective 3/10/12

\*See price list for charges

# 1 YEAR WARRRRANTY (INCLUDES LOSS & DAMAGE)