

Canadian Home Phototherapy Patient Order Form

Fax To: 1-419-636-1739 Mail To: PO Box 626 Bryan, OH 43506
 Email To: canadahome@daavlin.com



To be filled out by the PATIENT. To order, fill in the info below. Please print clearly. For assistance, please call 1.800.322.8546 x 219.

Patient Info:

Patient Name _____ Phone _____
 Address _____ City _____ Province _____ Postal Code _____
 Email _____ Alternate Phone _____
 Date of Birth _____ Gender: Male Female Physician _____
 Skin Condition: Psoriasis Vitiligo Eczema Other _____







Payment Info:

Check one: I wish to receive a **quote** for the following item(s) **OR** I wish to **order** the following item(s)
 If ordering, please indicate payment info: Name of Card Holder _____
 Card Holder's Address (or check here if same as patient) _____
 Account Number _____ Expiration Date _____
 3 Digit code (on back of card) _____ Amount to be Charged _____

Shipping Address:

Is the shipping address the same as listed above? Yes If not, please indicate the shipping address:
 Address _____ City _____
 Province _____ Postal Code _____
 Phone _____

Product Choice:

 DermaPal Hand-held Wand, Scalp & Spots <input type="checkbox"/>	 1 Series 18 in. Small Panel, Hands, Feet, Etc. <input type="checkbox"/> Optional Stand	 7 Series Six Foot Tall, Panel Style, Full-Body Treatment <input type="checkbox"/>	Circle Lamp Quantity: 6 lamps 8 lamps 10 lamps _____	 UV Series Six Foot Tall Cabinet, Full-Body Surround <input type="checkbox"/>	Circle Lamp Quantity: 16 lamps 24 lamps	 Levia Targeted Spots, Fiber-Optic Scalp <input type="checkbox"/>	 M Series Hand/Foot Light Box Lamps in Base & Hood <input type="checkbox"/>
--	---	--	---	---	--	---	---

Controller:

Digital Timer
(Not available on Levia)

Dosimetry
(Not available on DermaPal)

Lamps:

Narrowband UVB

UVA

Shipping & Confirmation:

Standard Delivery..... Standard shipping and broker fees are included in the price of the unit and consist of basic carriage to a ground floor door of your home or garage. The cost does not include Canadian taxes or additional warehousing fees. Daavlin will supply a NAFTA certificate to avoid duties. Contact your Account Specialist for details.

It is important to understand the size and weight of your Daavlin device and the shipping process, as all sales of medical devices are final. Please discuss these details and any special shipping needs you may have with your Account Specialist by calling 1-800-322-8546 x 219. Upon delivery to your home, you agree to inspect the package and notify Daavlin of any damage within 2 business days.

I confirm that the above information is accurate and complete to the best of my knowledge.
 I agree to follow my prescriber's instructions for proper use of this medical device.

Signature (Required) _____ Date _____