CHPDOSIMETRY Use Offer Code "T&K"



Save \$100 or more today

CHP Dosimetry is a Veteran Owned Small Business that offers NVLAP accredited radiation badge services to clients nationwide.

We offer personalized service that large companies just don't. Why wait in line? We are always ready to help. One call or email is all it takes!

Contact us today. We'd love to hear from you.

CHP Dosimetry 351 Oliver Springs Hwy Clinton, TN 37716

Tel: 888-766-4833 Fax: 866-491-9913 Sales@chpdosimetry.com www.chpdosimetry.com

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# Badge Wear- ers	Annual Fee**
1-4	\$69
5	\$65
6-9	\$60
10-20	\$54

- Why pay more?
- NO gotcha fees
- NO contracts
- NO SSN's
- NO automatic price increases*
- START SAVING TODAY

Make the switch. Get rewarded.

Fully NVLAP Accredited

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Under contract now? Call or email and we will remind you in time to switch and save from then on.

*We have not raised prices on a single client in 5 years!



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www.chpdosimetry.com enquiries@chpdosimetry.com

Dosimeter Order Form (or order/pay online at www.chpdosimetry.com)

[1] Service Type: □ Whole Body □ Ring Dosimete [2] Frequency Options: □ Quarterly (recommended) [3] Preferred Start Date (if any):		☐ Other (specify on 2nd page or call)
[4] Billing Address Company Name: Contact Name: Street Address: Address 2: Email:	City: State: Phone: Fax:	Zip:
[5] Shipping Address □ Same as Billing Company Name: Contact Name: Street Address: Address 2: Email:	City: State: Phone: Fax:	Zip:
[6] Report Address □ Same as Billing Company Name: Contact Name: Street Address: Address 2: Email:	City: State: Phone: Fax:	Zip:
[7] Credit Card Information □ Address Same as Billin □ AMEX □ VISA □ MASTERCARD Card Number: Security Code: Expiration Date: Street Address: Address 2:	City: State: Phone: Fax:	Zip:
[8] OFFER CODE: T&K Authorizing Individual Signature		_ Date:
Authorizing Individual Name (typed):		
Fax this form to CHP and start saving today +(866) 491 Contact Sales at +(888) 766-4833 or Email to sales@ch		com.



[9] Badge Assignment Information (can use multiples of this page if necessary)

			For Rings Only		
Name	Gender (M/F)	Date of birth	hand (R/L)	Only Size (S/M/L/XL)	
comments:					

Please review the applicable Terms and Conditions of service (CHP Domestic Terms and Conditions for U.S. Clients. Signing this form indicates agreement with the associated Terms and Conditions.