

Ounce Online Registration Form

New Registration	
Renewal	Please provide your License Name:
Add-On	Please provide your License Name:

Licensee Information:

Billing Information (if different):

Administrator Name:	Name:
Center/Agency:	Parent Company:
Address:	Department:
City/State/Zip:	Address:
Phone:	City/State/Zip:
Email (required):	Phone:
Subscription Date:	Email:

Item	Unit Price	# of Children		Total Due
Ounce Online License				\$
*Add your state and local tax			and local tax	\$
Total		Total	\$	

* If you are exempt, please include a copy of your state sales tax exempt certificate.

Method of Payment						
	Purchase Order #:					
	Check enclosed payable to NCS Pearson Inc.	Check #:	Amount:			
	Charge to: Please provide a phone number where a WSO Team member can contact you to obtain credit card information.					
	Phone Number:	Best Time to Call:				

Please attach this form with your purchase order and send via fax or mail to the information provided below. Checks					
MUST be mailed along with this form to the address provided below.					
Address:	Fax: 800-232-1223				
Pearson					
Attn: Inbound Sales & Customer Support	Question: Please call us at 800-627-7271				
PO Box 599700					
San Antonio, TX 78259	Our hours are 7:00 a.m. – 6:00 p.m. Central Time, Monday - Friday				

I agree to the terms set forth in the current catalog, including the Terms and Conditions, Returns Policy and Privacy at www.ounceonline.com. Any Pearson test products purchased under my account will be used in accordance with all applicable ethical and legal guidelines.

Signature: _____ Date: _____

