



Partners

in Medical Education Inc.

109 Brush Creek Road * Irwin, PA 15642 * 724-864-7320 (phone) * 724-864-6153 (fax)

Telecourse Passport Activation Form

Your passport to the world of GME Education!

Institution Name _____

Address _____

City _____ State _____ Zip _____

Which Partners Telecourse Passport do you wish to purchase?

- Individual Passport
Cost: \$1,200 for 12-month Passport
- Institutional Passport
Cost: \$4,000 for 12-month Passport

Individual Passport Owner – OR – Main Institutional Passport Contact Information:

Name _____ Degree _____
 Title _____ Department _____
 Phone _____ Fax _____
 Email _____

Method of Payment:

- Check Enclosed
Make check payable to **Partners in Medical Education, Inc.**
and mail to: **Partners in Medical Education, Inc., 109 Brush Creek Road, Irwin, PA 15642**
- Check to follow
Fax a copy of your internal check request with this form to 724-864-6153
- Credit Card ___ Visa ___ MasterCard®

Card # _____ Exp. Date _____ Total Cost to Charge to Card _____

Signature _____ Print Name _____

- A Partners Telecourse Passport must be used within 12 months of purchase.
- An Institutional Passport cannot be transferred to another institution.
- An Individual Passport is transferable to another employee within a department or institution upon written request when the original owner leaves the department or institution.

For Office Use Only

Individual Passport ID #: _____ Institutional Passport ID #: _____
 Date of Purchase: _____ Expiration Date: _____