



CRH O'Regan System - Marketing Material Order Form

Please email completed form to orders@crhmedcorp.com or fax to **866-477-5386**.

**NOTE: All consumer and physician materials are free of charge.
Please allow at least 5 - 7 business days for delivery.**

1) PRACTICE NAME: _____

2) Physician's Name: _____

3) Order Contact Name: _____ Email: _____

SHIP TO ADDRESS: _____

 City State Zip Code

TELEPHONE: _____ EXT: _____ FAX: _____

Consumer Materials

DESCRIPTION	QTY
Website Profile – YES please add our practice to your crhsystem.com website: (please email headshot in white lab coat and 180 word or less bio to Jennifer: jsyrnyk@crhmedcorp.com) Sample profile can be viewed at: www.crhsystem.com	Yes _____
Consumer Brochure {bi-fold - 25 per package}	# of pkgs
Tear-Off Pad {Post-Colonoscopy/Hemorrhoid Diagnosis Sheet - 25 sheets per pad}	# of pads
In-Office Table/Counter Top Display {please indicate total qty needed}	
Laminated Wall Chart {size 12" x 18" portrait} {please indicate total qty needed}	
Laminated Discussion Diagram {size 8.5 x 11 landscape } {please indicate total qty needed}	
Print Ad Templates** **Sample provided in starter kit. Please email jsyrnyk@crhmedcorp.com to receive electronic version.	

Physician Education

DESCRIPTION	QTY
Dr. Iain Cleator, Hemorrhoid Banding Report – {25 per package }	# of pkgs
Referring Physician Material {25 per package }	# of pkgs