



## Order Form for Educational Products and On-line Training

Catalog	Item	Qty	Cost: (US \$)	Total
<b>BOOKS</b>				
501	The Ultimate Step-by-Step Guide to Conducting Pharmaceutical Clinical Trials in the USA for <b>Sponsors and Monitors</b>		<b>160.00</b>	
502	The Ultimate Step-by-Step Guide to Conducting Pharmaceutical Clinical Trials in the USA for <b>Investigators and Clinical Research Coordinators</b>		<b>160.00</b>	
<b>FLASH CARDS</b>				
700	All Flash Card Pack (Includes all cards in items 701, 702, 703, 704 and 705)		<b>250.00</b>	
701	GCPs Made Easy® Flash Cards – <b>USA Drug</b> Edition (includes 21 CFR 312, excludes 812)		<b>110.00</b>	
702	GCPs Made Easy® Flash Cards – <b>ICH</b> Edition		<b>110.00</b>	
703	GCPs Made Easy® Flash Cards – <b>USA Device</b> Edition (includes 21 CFR 812, excludes 312)		<b>110.00</b>	
704	GCPs Made Easy® Flash Cards – <b>21 CFR 312 (IND)</b> Edition		<b>60.00</b>	
705	GCPs Made Easy® Flash Cards – <b>21 CFR 812 (IDE)</b> Edition		<b>60.00</b>	
<b>CERTIFICATION PREPARATION PACKAGES</b>				
801	Cert Pack # 1 Sponsor book and all flash cards		<b>375.00</b>	
803	Cert Pack # 3 Investigator book and all flash cards		<b>375.00</b>	
805*	<b>Optional Discounted Purchase with any Certification Package</b> <input type="checkbox"/> 100 Question GCP Practice Test <b>with feedback</b>		<b>75.00</b>	
806*	<b>The Ultimate Certification Preparation Package for Coordinators (Includes: 502, all flash cards, 805, 8002)</b>		<b>650.00</b>	
807*	<b>The Ultimate Certification Preparation Package for Investigators (Items 502, all flash cards, 805, 9005)</b>		<b>650.00</b>	
<b>ON-LINE TRAINING AND TESTING (No tax on these services)</b>				
5102T*	100 Question GCP Practice Test <b>with feedback</b>		<b>95.00</b>	
7000*	200 Question GCP Test <b>without feedback (test only)</b> <input type="checkbox"/> CRC (7102T) <input type="checkbox"/> Investigator (7201T) <input type="checkbox"/> Monitor (7301T) <input type="checkbox"/> General (7401T)		<b>95.00</b>	
8001*	<b>NEW! Coordinator GCP Training</b>		<b>175.00</b>	
8002*	<b>NEW! Coordinator GCP Training with 8 contact hours<sup>1</sup></b>		<b>250.00</b>	
8003*	<b>Informed Consent Process Training with 2 contact hours<sup>2</sup></b>		<b>95.00</b>	
9002*	Informed Consent Process Training without CE		<b>75.00</b>	
9003*	Informed Consent Process Training with 2 hours of Pharmacy CE		<b>95.00</b>	
9004*	Informed Consent Process Training with 2 hours of CME		<b>95.00</b>	
9005*	<b>NEW! Investigator GCP Training with 5 hours of CME</b>		<b>225.00</b>	
9006*	Investigator GCP Training without CE		<b>175.00</b>	
<b>SUBTOTAL</b>				
<b>DISCOUNT</b>	If eligible, enter your organization name, code and amount of discount. Organization Name: _____ Organization Code: _____			
<b>TAX</b>	<b>On product sales to Florida Residents Only</b> <input type="checkbox"/> Check if applicable		7 %	
<b>SHIPPING AND HANDLING</b>	<b>Shipping to continental US addresses is complimentary.</b> Please contact us by telephone or email for shipping rates outside of the continental US. <b>1-813-929-9269</b> or Email: <a href="mailto:training@raninstitute.com">training@raninstitute.com</a>			
<b>ORDER TOTAL</b>				
<p><b>Please complete your customer and shipping information on the following page.</b></p> <p><b><a href="http://www.RanInstitute.Com">www.RanInstitute.Com</a>      <a href="http://RanInstitute.TrainingCampus.Net">http://RanInstitute.TrainingCampus.Net</a></b></p>				
<p>1 Provider approved by the California Board of Registered Nursing, Provider # 14637 for 8 Contact Hours.            2 Provider approved by the California Board of Registered Nursing, Provider # 14637 for 2 Contact Hours.            * Please provide Email address with your Customer Information for assignment of these on-line courses.</p>				

# Customer Information



## Customer and Shipping Information

Name \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State/Region \_\_\_\_\_

Postal code \_\_\_\_\_ Country \_\_\_\_\_

Telephone \_\_\_\_\_

Fax \_\_\_\_\_

Email \_\_\_\_\_  
 For my online training or testing  To receive the free RAN Institute E-bulletin

Shipping Location  Home  Business

## Payment Information

Please note that all orders require prepayment by company check or credit/debit card. We do not accept personal checks.

Enclosed is my **company check** or money order for \$ \_\_\_\_\_ payable to The RAN Institute, Inc.

**Credit or Debit Card Payment**  MasterCard  Visa  American Express

**Billing Address**  **Check here if billing and shipping addresses are the same. If not, complete below:**

Street Address	City, State or Region	Postal Code

Card Number: \_\_\_\_\_ Exp. Date \_\_\_\_/\_\_\_\_

Card Owner: \_\_\_\_\_ Authorized Signature: \_\_\_\_\_

## How to Order

**Call:** 813-929-9269

**Fax:** 813-929-0125

**Mail** with payment to: The RAN Institute, Inc, P. O. Box 1279, Land O' Lakes, FL 34639 USA

## Please tell us how you heard about us:

Word of mouth/colleague

I am a previous customer

Convention

Journal advertisement

Training seminar

Internet search

We value your business. Thank you for your order.

[www.RanInstitute.Com](http://www.RanInstitute.Com)

<http://RanInstitute.TrainingCampus.Net>