

By submitting this order to Phonak, you agree that all information generated as part of the order fulfilment process is the property of Phonak and the client has been advised that their personal information (including name, date of birth, gender, device sizing and service history) will be retained for warranty claims, product recall and statistical purposes. The information will only be released or disclosed to another person or agency when specifically requested and with your client's consent.

Phonak New Zealand Level 2, The Chester Building,
28 The Warehouse Way, Northcote, Auckland 0627
Fax: 09 486 1895. Email: nzorders@phonak.com

1. Order Details		Order	Quote	Roger SoundField Trial Insurance (NZTrial)	
Clinic Details	Invoice To _____	Order Details	Date Required _____	Order taken by _____	
	Ship To _____		Aud/AODC/Assist _____		
Same as Invoice		Order Number _____		Order Date _____	
Client Details	Name _____	HAFS Order	Age _____	Enable Order # _____	
	School _____				

2. Hearing Instruments Details / New Orders					
Existing Instruments	(If CI with a MyLink+ then short loop required)	New Order	QTY	COLOUR	SERIAL NUMBER
BRAND	MODEL	MODEL/PART			
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

3. Roger Order					
Transmitters					
For Education	QTY		For Adults	QTY	COLOUR
Roger Touchscreen Mic	_____		Roger Select	_____	_____
Roger Pass-around	_____		Roger Select iN	_____	_____
Roger Multimedia Hub	_____		Roger Pen 1.1	_____	_____
Roger WallPilot	_____		Roger Pen iN	_____	_____
Roger Repeater	_____		Roger EasyPen	_____	_____
			Roger Clip-on Mic 1.1	_____	_____
			Table Mic II	_____	_____
			Table Mic II iN	_____	_____
			Table Mic II Bundle (1 x Table Mic II iN, 1 x Table Mic II)	_____	_____
Roger Receiver options			QTY	COLOUR	ACCESSORIES
Roger X	Marvel Hearing Aids, BTE's with audio shoe, ComPilot II Not needed if ordering "iN" transmitter	_____			Long Loop ZZ FC-C46
Roger MyLink	Any inst. with telecoil	_____			Audio Shoe
Roger 14	Cochlear Nucleus 5 & 6	_____			■ Roger 14 Protection Cover
Roger 17	Advanced Bionics Naida CI Q series	_____			Tamper Proof Battery Lock
Roger 18	Bolero B P/SP, Bolero V P/SP, Audéo V13, Naida V RIC/SP, Sky V P/SP/RIC, Audéo B13	_____			Tamper Proof for Sky V & B range only
Roger 19	Naida B and V UP, Sky B and V UP	_____			Tamper Proof for Sky V & B range only
Roger 20	For Cochlear Nucleus 7 Speech processor	_____			
Roger 21	For MEDEL Sonnet Speech processor	_____			
Roger DigiMaster X		_____			
Roger Focus	Receiver	_____			Paed Kit
	Tubing left	OBL	1BL	2BL	3BL
	Tubing right	OBR	1BR	2BR	3BR
	Open Dome	Small	Medium	Large	
Roger DigiMaster SoundField			QTY	ACCESSORIES	
Roger DigiMaster 5000	Wall or portable	_____		■ Power Cable	■ Wall Mounting Brackets
Roger DigiMaster 7000	Wall or portable	_____		■ 3m Audio Cable	■ Wall Mounting Fixed Stand
				Portable Tripod	

7. Special Instructions
C.C. invoice to _____