



AMH

AUSTRALIAN MEDICINES HANDBOOK

2020 Order
Form:
RACGP
Member^{\$}

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| ORDER DETAILS All prices include GST | AMH RRP | RACGP Price | Add Postage & Handling (single item) | Quantity | Total Price (inc P&H) |
|--|------------|----------------|---|----------|--------------------------|
| AMH Book 2020 [#] (Delivery Date: Mid-Late January) | \$260.00 | \$230.00 | \$19.00 | | |
| AMH App (for PC & MAC only) (Single-User)* | \$260.00 | \$230.00 | – | | |
| AMH Online (Single-User)* | \$260.00 | \$230.00 | – | | |
| AMH Children's Dosing Companion - 2019 (Print) | \$125.00 | \$115.00 | \$12.00 | | |
| AMH Children's Dosing Companion (Online)* | \$115.00 | \$105.00 | – | | |
| AMH Aged Care Companion - 2018 (Print) | \$105.00 | \$96.00 | \$12.00 | | |
| AMH Aged Care Companion (Online)* | \$100.00 | \$90.00 | – | | |
| AMH BOOK + PACKAGES 2020 | | | | | |
| AMH Book 2020 [#] + AMH App (Single-User)* | \$400.00 | \$355.00 | \$19.00 | | |
| AMH Book 2020 [#] + AMH Online (Single-User)* | \$400.00 | \$355.00 | \$19.00 | | |
| AMH Book 2020 [#] + CDC Book 2019 | \$340.00 | \$320.00 | \$25.00 | | |
| AMH Online + CDC Online (Single-User)* | \$330.00 | \$310.00 | – | | |
| *Each licence is Single-User and for a single location. By completing this form, you are deemed to have read and agreed to the terms and conditions of the product licence/s. Details can be viewed online at www.amh.net.au (under the PRODUCTS drop down menu in the LICENCES section). [§] The RACGP discount only applies to current valid members, and these rights cannot be transferred to any other 3rd party. | | | | | TOTAL \$ |

PURCHASER DETAILS

Please complete all sections

Electronic version purchasers MUST provide email address

| | | | |
|-------------------------|--------------|---------------------|--|
| Company / Business Name | | RACGP Member Number | |
| Contact Name | | Title | |
| Delivery Address | | | |
| State | Postcode | Daytime Phone | |
| Email | Mobile Phone | | |

From time to time you will receive AMH marketing communications such as information on new product releases and updates, special offers and other marketing material. In keeping with our privacy policy you can choose to opt out by ticking the following options. By email ☐, by post ☐. You can change your preferences at any time once you have an active account.

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WHAT IS YOUR PROFESSION? (This information is for internal AMH use and will not be made available to any third party)

| | | | |
|--|---|--|---|
| COMMUNITY MEDICAL PRACTITIONER <input type="checkbox"/> | HOSPITAL MEDICAL PRACTITIONER <input type="checkbox"/> | MEDICAL SPECIALIST <input type="checkbox"/> | MEDICAL STUDENT <input type="checkbox"/> |
| OTHER (Please specify) _____ | | | |

PAYMENT DETAILS

Full payment (Cheque/Money Order/Credit Card Details) MUST be included with Order

| | | |
|---|---|---|
| TOTAL AMOUNT \$ | PAYMENT METHOD: Please tick applicable box | CHEQUE/MONEY ORDER <input type="checkbox"/> (Send by post; make payable to Australian Medicines Handbook) |
| CREDIT CARD DETAILS | | EFT <input type="checkbox"/> (Invoice will be forwarded with bank details enclosed. Use invoice number as reference when paying.) |
| VISA <input type="checkbox"/> MASTERCARD <input type="checkbox"/> AMEX <input type="checkbox"/> | | |
| NUMBER | | |
| <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> | | |
| NAME ON CARD | | |
| EXPIRY DATE ____/____/____ CCV _____ SIGNATURE _____ | | |

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