

2008 NEW ENGLAND SCHOOL OF ADDICTION STUDIES

AGENCY AUTHORIZATION LETTER

APPLICANT'S NAME: \_\_\_\_\_

METHOD OF PAYMENT: (AGENCY) If the following section is filled out in its entirety, it will serve as an agency authorization letter:

- Agency responsible for \$ \_\_\_\_\_ Deposit amount enclosed: \$ \_\_\_\_\_
Agency will pay the balance of \$ \_\_\_\_\_ by 6/9/08.

Agency's Name: \_\_\_\_\_

Authorizer's Name: \_\_\_\_\_

Authorizer's Signature: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_ E-mail: \_\_\_\_\_

Attached Purchase Order # \_\_\_\_\_ for \$ \_\_\_\_\_

Charge \$ \_\_\_\_\_ to credit card: MasterCard Visa American Express

Credit Card Number: [ ]

Expiration Date: [ ] [ ] [ ] [ ]

Security Code: (3 digits on back of card): [ ] [ ] [ ]

Name on Credit Card \_\_\_\_\_

CC Holder's Billing Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Card Holder's Signature: \_\_\_\_\_

PLEASE RETURN TO: NEIAS, 75 Stone St., AUGUSTA, ME 04330 FAX 207-621-2550
Unless a valid agency purchase order or letter of authorization is provided, you are personally responsible for the entire tuition by 6/9/08. Please note that all registrations, including those secured by purchase order or agency letter will be liable for the following cancellation and refund policy. All cancellations must be received in writing. Written cancellations may be faxed (207-621-2550) or e-mailed (neias@neias.org) by the following deadlines:

- May 23, 2008 .....Full Refund
June 6, 2008 before 4:30 p.m. ....\$200 cancellation fee
From June 6, 2008 after 4:30 p.m.....\$350 cancellation fee

Please copy this agency authorization letter onto company letterhead and return to NEIAS, 75 Stone St., Augusta, ME 04330; FAX 207-621-2550.