OQ®-Analyst Software License Application & Order Form

Please Circle Any Three Instruments:

Adult Instruments	*Youth Instruments*	*Group Instruments*
OQ®-45.2	Y-OQ® 2.01	OQ®-GRQ
OQ®-30.2	Y-OQ® SR 2.0	OQ®-GQ
OQ®-ASC	Y-OQ® 30.2 PR	GCQ-S
S-OQ® 2.0	Y-OQ® 30.2 SR	
BPRS		

Additional Instruments are Available for a $40.00 Additional Annual License Fee Each:

Order Information:	**Enter Fee:**
A) License Fee (As Detailed in Price Quote): $250.00 x # of Clinicians ____	$
B) Additional Measures (Beyond the First Three Measures - $40.00 Each, Per Clinician)	$
C) Translated Instruments ($25.00 Each, Per Clinician) Please Specify Language _____	$
D) Additional Manuals ($25.00 Each)	
E) Installation Fee and Technical Support ($150.00):	$
F) Subtotal (Add lines A through E):	$
G) Utah Residents must include Sales Tax (6.85%):	$
H) Shipping and Handling ($25 Standard and $45 for Overnight in U.S. $50 for International):	$
I) Grand Total Enclosed in this Order:	=

Annual Renewal is 100% of License and Hosting Fees

Payment Information: *Please Circle One*: Check or P.O. Enclosed Credit Card Payment (See Below)

Credit Card Information:

Please Circle One: VISA MASTERCARD

Name As It Appears on Credit Card (*Please Print Cleary*): _____

Billing Address and Zip Code (*Please Print Clearly*): _____

Card Number: _____ CVV2 # ____ Expiration (/)

You MUST provide us with both a clinical and technical contact to place an order

Contact Information:	**Shipping Information:** *Please Print or Type Clearly*			
Technical Contact:	Clinical Contact:			
Technical Phone#	Clinical Phone#			
Technical Email:	Organization:			
Fax#	Address:			
Clinical Email:	Address:			
Other:	City:	State:	Zip:	Country:

Return This Form (License Application & Order Form) Along with your Total Payment To:

OQ Measures LLC
P.O. Box 521047
Salt Lake City, UT 84152
Please Make Checks Payable to: OQ Measures LLC

Phone: (888) MHSCORE (888-647-2673)
Fax: (801) 747-6900
Email: Info@OQMeasures.com
Web: www.OQMeasures.com