Subscribe to UpToDate® online at our special group pricing.

Group of 11 or more will receive a discount on their subscription price.

Follow these 4 easy steps....

**Step 1-** Organize a group of individuals to subscribe together. Determine if you qualify for a discount based on the size of your group (see pricing below*).

<table>
<thead>
<tr>
<th>Number of individuals in group</th>
<th>One-year subscription price (per subscriber)</th>
<th>Two-year subscription price (per subscriber)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1-10</td>
<td>US $499</td>
<td>US $899</td>
</tr>
<tr>
<td>26+</td>
<td>US $419 (savings of US $80)</td>
<td>US $769 (savings of US $229)</td>
</tr>
<tr>
<td><strong>GROUP RENEWAL RATE</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>US $419</td>
<td>US $769</td>
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*Prices are subject to change without notice. Quoted savings are based on one-year new subscription pricing of $499.

+Price applies to renewing subscribers who are part of a group of 11 or more.

**Step 2-** Have each individual within your group complete the **Group Member Subscription Form (A)**.

**Step 3-** Complete the **Group Order Verification (B)** and the **Group Order Summary Form (C)**.

**Step 4-** Collect and submit all of the following forms:

- **Group Member Subscription Forms (A)** – one for each individual subscribing
- **Group Order Verification (B)** – one per group
- **Group Order Summary Form (C)** – one per group

**Mail:**
UpToDate Group Sales
UpToDate
95 Sawyer Road
Waltham, MA 02453 USA

**Fax:** +1-781-642-8890

Access will begin when payment and required documentation is received (if applicable).

Questions about your order? Please contact:
UpToDate Group Sales
phone: +1-781-392-2427
fax: +1-781-642-8890
e-mail: grouporders@uptodate.com
Group Member Subscription Form

ENTER SUBSCRIBER INFORMATION
Please write clearly and supply a secure email address to receive your user name and password. We do not rent, share or sell information to third parties.

GROUP NAME

SUBSCRIBER NAME

SUBSCRIBER ADDRESS

CITY __________________________________________ STATE/PROVINCE ______________________________________________________

COUNTRY __________________________________ POSTAL CODE ___________________________________________________________

OFFICE PHONE ______________________ MOBILE PHONE ______________________

FAX ________________________________ EMAIL __________________________________________________________

PROFESSION/ROLE (see list below)* __________________ SPECIALTY ______________________________________________________

*Physician, Corporate Officer, Physician Assistant, Medical Librarian, Nurse, Medical Student, Nurse Practitioner, Resident, Pharmacist, Other (please specify)

NPI (if applicable) _____________________________________________________

VAT-ID _________________

REVIEW SUBSCRIPTION INFORMATION
Ask your group coordinator your group size so you know which subscription price you are eligible for (see pricing below*).

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SELECT SUBSCRIPTION OPTION

ORDER TYPE:  NEW  RENEWAL (Account # ___________________________ )  TERM ______________

ENTER SUBSCRIPTION AMOUNT  US $ __________

ADD PROCESSING FEE OF $15 (new subscribers only)  + US $ __________

ESTIMATED SALES TAX/VAT  + US $ __________

ESTIMATED ORDER TOTAL  = US $ __________

Applicable tax will be added at the time your order is processed. UpToDate collects sales tax in states that require it for online purposes. If you are eligible for tax exempt status on this order, you must supply your tax exempt certificate with this form. The tax exemption cannot be applied at a later date. UpToDate is required to collect and remit VAT in select countries. Supply your VAT above. VAT will be added to your order at time of processing (if applicable).

*Prices are subject to change without notice. Quoted savings are based on one-year new subscription price of $499.

For system requirements, go to www.uptodate.com/requirements.
Attached are subscription orders for the following individuals who are members of this group. All individual orders and payments MUST be submitted together with this form to qualify for the special pricing and additional discount if applicable.

**GROUP NAME__________________________**

**CONTACT NAME________________________**

**SUBSCRIBER NAMES:**

1. ___________________________________________ ☐
2. ___________________________________________ ☐
3. ___________________________________________ ☐
4. ___________________________________________ ☐
5. ___________________________________________ ☐
6. ___________________________________________ ☐
7. ___________________________________________ ☐
8. ___________________________________________ ☐
9. ___________________________________________ ☐
10. __________________________________________ ☐
11. __________________________________________ ☐
12. __________________________________________ ☐
13. __________________________________________ ☐
14. __________________________________________ ☐
15. __________________________________________ ☐
16. __________________________________________ ☐
17. __________________________________________ ☐
18. __________________________________________ ☐
19. __________________________________________ ☐
20. __________________________________________ ☐
21. __________________________________________ ☐
22. __________________________________________ ☐
23. __________________________________________ ☐
24. __________________________________________ ☐
25. __________________________________________ ☐
26. __________________________________________ ☐
27. __________________________________________ ☐
28. __________________________________________ ☐
29. __________________________________________ ☐
30. __________________________________________ ☐

For additional names, please photocopy, complete and attach to this form.
## Group Order Summary Form

### ENTER GROUP CONTACT INFORMATION

GROUP NAME ___________________________ GROUP BILL TO # _______________________

CONTACT NAME _________________________

CONTACT ADDRESS _______________________

CITY _____________________________ STATE/PROVINCE ________

COUNTRY __________________________ POSTAL CODE ________

OFFICE PHONE ______________________ MOBILE PHONE __________

FAX _______________________________ EMAIL _______________________

We do not rent, share or sell information to third parties.

### CALCULATE PAYMENT

<table>
<thead>
<tr>
<th>Group size</th>
<th>Subscription cost*</th>
<th>Tax/VAT**</th>
<th>Processing fee</th>
<th>Total cost per subscriber ((A + B + C))</th>
<th>Total number of subscribers</th>
<th>Grand total ((D \times E))</th>
</tr>
</thead>
<tbody>
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</table>

**Price applies to renewing subscribers who are part of a group of 11 or more.**

### PROVIDE PAYMENT INFORMATION

Full payment with check or credit card is required at the time of order. If you are not completely satisfied, simply cancel within 60 days for a full refund (issued in US dollars).

Check all that apply:
- [ ] SEND RECEIPTS TO INDIVIDUALS
- [ ] SEND ONE RECEIPT TO GROUP COORDINATOR

Check all that apply:
- [ ] CONTACT GROUP COORDINATOR FOR FUTURE GROUP RENEWAL
- [X] CHECK ENCLOSED (Payable to UpToDate in US dollars drawn on US bank.)
- [X] CHARGE MY CREDIT CARD
  - [ ] VISA
  - [ ] MASTERCARD
  - [ ] DISCOVER
  - [ ] AMERICAN EXPRESS

CARD NUMBER ____________________________

EXPIRATION DATE ________________________

SIGNATURE ______________________________

**Prices are subject to change without notice.** **Applicable tax will be added at the time your order is processed.** UpToDate collects sales tax in states that require it for online purposes. If you are eligible for tax exempt status on this order, you must supply your tax exempt certificate with this form. The tax exemption cannot be applied at a later date. UpToDate is required to collect and remit VAT in select countries. Supply your VAT ID above. VAT will be added to your order at time of processing (if applicable).

**Price applies to renewing subscribers who are part of a group of 11 or more.**

### CREDIT CARD BILLING ADDRESS (if different from primary address)

<table>
<thead>
<tr>
<th>NAME</th>
<th>ADDRESS</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
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SOURCECODE: GROUP3
TERRCODE: GOOS