



## Proficiency Testing Program – “Multi Site” Order Form

### Plasticity Proficiency Program 2024 (126)

Please email the completed form to [info@labsmart.com.au](mailto:info@labsmart.com.au)

☞ Please **PRINT** company representative contact details:-

Organisation:	<input type="text"/>	Address:	<input type="text"/>
NATA Ac. No.	<input type="text"/>	(Postal)	<input type="text"/>
Contact:	<input type="text"/>		<input type="text"/>
Mobile or Phone:	<input type="text"/>		<input type="text"/>
E-mail:	<input type="text"/>		<input type="text"/>

**Note:** Postal address must be **Australia Post** recognised

☞ I would like to request participation in this proficiency program and by signing the authorization below agree to LabSmart Services proficiency testing program terms and conditions (see [www.labsmart.com.au](http://www.labsmart.com.au) for details) and the payment of the prescribed fees.

-----  
**Name** (Please Print)

-----  
**Authorised Signature**

-----  
**Date**

☞ Please calculate the total fee payable:-

<b>Number of sites</b> (i.e. laboratories and Annex sites) =	<input type="text"/>	by \$680 =	\$ <input type="text"/>
<b>Total number of additional samples</b> required over all sites =	<input type="text"/>	by \$550 =	\$ <input type="text"/>
	<input type="text"/>	Subtotal =	\$ <input type="text"/>
<b>Enter discount amount</b> (see information sheet for details)	<input type="text"/> %	Less discount of	\$ <input type="text"/>
<b>TOTAL FEE PAYABLE</b>			\$ <input type="text"/>

☞ Please **PRINT** invoicing details, leave blank if the same as company details:-

Company:	<input type="text"/>	Attention:	<input type="text"/>
Address:	<input type="text"/>	(Name)	<input type="text"/>
(Postal)	<input type="text"/>	E-mail:	<input type="text"/>
Phone:	<input type="text"/>	Mobile:	<input type="text"/>

☞ Please indicate the preferred method of payment (tick):-

Invoice

PO N° \_\_\_\_\_

EFT

Credit Card

(2.5% surcharge)

*Thank you for choosing LabSmart Services!*

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☞ Please **PRINT** details below for sample delivery to each site. ‘Annex laboratory’  
 Samples are usually best sent “Care of” the main laboratory.

Number of additional samples required at this site

Lab: <input style="width: 95%; height: 20px;" type="text"/> NATA Ac. No. <input style="width: 95%; height: 20px;" type="text"/> Contact: <input style="width: 95%; height: 20px;" type="text"/> Mobile/Phone: <input style="width: 95%; height: 20px;" type="text"/> E-mail: <input style="width: 95%; height: 20px;" type="text"/>	Address: <input style="width: 95%; height: 20px;" type="text"/> <b>(Postal)</b> Address: <input style="width: 95%; height: 20px;" type="text"/> <b>(Courier)</b> <input style="width: 95%; height: 20px;" type="text"/> <input style="width: 95%; height: 20px;" type="text"/>
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☞ If you would like to include additional sites, please copy a blank of this page and complete or attach your own separate list of site details.