



AuDNet, Inc. • 1000 East 146th Street • Suite 121 • Burnsville, Minnesota 55337
 NowiHear.com Provider Locator Listing Application

1. Practice Information To Be Included In the Locator Listing:

Practice Name	
Audiologist(s) Name and Degree(s)	
Practice Address	
City	
State	
Zip	
Phone Number	
Fax Number	
Email Address	
Website URL	

2. Order Details (Annual Billing from AuDNet)

<i>Item (Choose one)</i>	<i>Price</i>	<i>Order</i>
Basic Listing on NowiHear.com Audiology Locator	\$349.00	
Priority Listing on NowiHear.com Audiology Locator once website link or video is submitted and approved	\$349.00	
Annual Billing TOTAL		\$

3. Payment Method

Invoice me and I will pay by check: _____

I wish to pay by credit card: Visa: _____ Master Card: _____

Name on credit card: _____

Credit card number: _____

Expiration date: _____

I certify that I am a licensed audiologist in good standing in the state of _____

Signature of Practice Owner: _____ Date: _____

FAX SIGNED FORM TO 352-735-0889