

## Declaration of Use Form

**Company/Account Name****Customer Number (if known)**

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**Department**

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**Company Address**

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**Contact Details**

First Name	Surname	Title / Position
Primary Contact Phone Number	Primary Contact Email Address	

**Declaration of use:**

Please confirm how you use the products you currently purchase from AsureQuality Diagnostics

Please tick all that apply:

- in-vitro*    *in-vivo*    Veterinary Diagnostics    Academic Research  
 Biotechnology    Product Development    Medical Research    Agriculture  
 Other: (Please specify): \_\_\_\_\_

**Product Information:**

I would like to receive the following information from AsureQuality Diagnostics

Please tick all that apply:

- New product releases    Current Promotions    Technical Notes  
 Other (Please specify): \_\_\_\_\_

For access to our terms and conditions please visit [www.AQdiagnostics.com](http://www.AQdiagnostics.com) or email us [diagnostics@asurequality.com](mailto:diagnostics@asurequality.com)