



953 Franklin Avenue Suite 200
 Garden City, NY 11530
 (844) 888-2418
 www.EnrichedPRP.com

EnrichedPRP is HIPAA compliant
 All information is kept strictly confidential

New Customer Form

Customer Information			
Name of Business		Date	___ / ___ / ___
Contact Person		Phone	
Contact Email		Fax	

Shipping Address (Clinic / Physician's Office)			
Street			
City			
State		Zip	
Delivery Instructions:			

Billing Address <input type="checkbox"/> Check if Billing Address is Shipping Address			
Street			
City			
State		Zip	
Attach Accounts Payable information separately if applicable			

Physician Information							
Physician		DEA#		LIC#		NPI#	
Physician		DEA#		LIC#		NPI#	
Physician		DEA#		LIC#		NPI#	

Payment Information <small>Note: Your credit card will be kept on file, and a receipt will be sent stamped "PAID".</small>			
Method of Payment	<input type="checkbox"/> MasterCard <input type="checkbox"/> VISA <input type="checkbox"/> Amex <input type="checkbox"/> Discover		
Credit Card Number		Expiration	___ / ___
Card Holder's Name		CVV Code	
Card Holder's Signature			

- 1) The undersigned agrees to notify EnrichedPRP, LLC of any change in ownership, form of business, and/or business name.
- 2) This document will be as effective in photocopy or fax form as in the original.
- 3) The undersigned warrants that they have full authority to sign this agreement and obligate the entity hereunder.

Signature: _____ Date: _____

Signature: _____ Date: _____

Print Name & Title: _____

Print Name & Title: _____

- I would like my initial order to consist of:
 1 *Executive Series* Centrifuge and 10 GS60 Pure II PRP Kits for a total of \$5,050 + S/H
- I would like my initial order to consist of:
 1 *Platinum Series* Centrifuge and 10 GS60 Pure II PRP Kits for a total of \$4,750 + S/H

Print and fax order to: (844) 888-2418 or email: orders@enrichedprp.com



SOLE SOURCE SUPPLY AGREEMENT

This Agreement is made and entered into by and between Enriched PRP, LLC located at, 953 Franklin Avenue, Suite 200, Garden City, NY 11530 a limited liability company (“Supplier”), and [COMPANY NAME] _____ a _____ company (“Customer”).

Premises: Whereas, Supplier makes available to Customer EmCyte biologics products and items manufactured by EmCyte Corporation (“Manufacturer”); and whereas, Customer desires to obtain these biologics products and items from Supplier. Now, therefore, in consideration of the Price list found on Exhibit A, and of their mutual covenants and agreements, the parties agree:

1. **Sole Source.** Customer agrees that Supplier is the sole source vendor for EmCyte and provider for products and services which Customer may require during the term of this Agreement. Customer agrees that it will not purchase or receive any point-of-care EmCyte products or services from other vendors of the Manufacturer at any time during the term of this Agreement.

2. **Pricing.** Customer agrees to pay Supplier for products and services at the rates listed in the attached Exhibit A. (Pricing subject to change as dictated by the Manufacturer)

3. **Effective Date, Term.** The effective date of this Agreement is the date of execution and continues for a term of twelve (12) months and unless notified in writing at least 60 days prior to expiration will automatically renew for an additional twelve (12) months and continue to do so for each twelve (12) month cycle.

4. **Protocols and Policies.** While on Customer premises, Supplier personnel shall observe Customer’s general operating protocols and policies which apply to vendors.

5. **Independent Contractor.** Supplier and Customer are independent contractors. Supplier is an independent contractor, and not an agent of Customer. Nothing in this Agreement creates an employer-employee relationship between Supplier and Customer or any of their personnel.

6. **Miscellaneous.** This Agreement is the complete agreement of the parties regarding the subject matter hereof, and may not be amended except by a writing signed by the party to be charged; any amendment by Supplier can be made only by the President of Supplier. There are no representations or agreements between the parties not contained in this Agreement. This Agreement supersedes all prior and contemporaneous agreements between the parties.

7. Supplier must notify Customer of any price changes within 30 days of renewal date of contract or existing pricing will prevail.

Customer: [COMPANY NAME] _____

By: _____

Date: _____

Printed Name: _____

Title: _____

Supplier:



953 Franklin Avenue, Suite 200, Garden City, NY 11530
By: Thomas Mastanduono R.Ph., President