HEARING AID DISCLOSURE AGREEMENT/MONEY BACK GUARANTEE

(Business Name)_____(Business Address)_____

Telephone No. ( ) _____

PART A.

Description of services included in fitting procedure or process, and sale and delivery of hearing aid.	**FEE** (State whether fee is waived if hearing aid purchased)	**REFUNDABLE** (Upon return of hearing aids)	**NOT REFUNDABLE**

THIS DISCLOSURE AGREEMENT WAS PROVIDED, PARTS A AND B WERE EXPLAINED, AND PART A (FEES FOR SERVICES NOT PART OF THE PRICE OF THE HEARING AID) WAS COMPLETED AT _____(time) ON _____(date), BEFORE ANY SERVICES WERE PROVIDED. PART B (CANCELLATION FEES THAT WILL BE INCURRED IF A HEARING AID IS RETURNED UNDER THE 30-DAY MONEY BACK GUARANTEE BELOW), WAS COMPLETED AND EXPLAINED AFTER SERVICES WERE PROVIDED AND BEFORE ANY PAYMENT WAS MADE. IF PART B IS NOT COMPLETED, IT IS BECAUSE A HEARING AID WAS NOT RECOMMENDED OR NOT DESIRED.

NOTHING IN THIS DISCLOSURE AGREEMENT SHALL RELIEVE A REGISTRANT OF THE OBLIGATION TO REFUND ALL OR PART OF THE ABOVE FEES, INCLUDING THOSE LISTED AS NOT REFUNDABLE, IF A COURT DETERMINES THAT THE REGISTRANT HAS VIOLATED A PENNSYLVANIA CONSUMER PROTECTION LAW IN THE SALE OR FITTING OF THE HEARING AID (OR SIMILAR DEVICE) AND IF THE COURT ORDERS SUCH REFUND.

_____ Customer's Signature

_____ Registrant's Signature

PART B.

HEARING AIDS & ACCESSORIES		**DESCRIPTION of GOODS –** include make, model, serial number(s)	**PRICE**	**REFUNDABLE** (upon return of hearing aid)	**NOT REFUNDABLE** (Cancellation Fee)
Hearing Aid(s)	**Right**				
	Left				
Accessories (Describe, if applicable)					
TOTAL					
Total maximum Cancellation Fee is lesser of 10% or $150 per hearing aid including accessories.					

30 Day Money Back Guarantee: If a hearing aid is returned within 30 days of date of delivery in the same condition, ordinary wear and tear excluded, you are entitled to a refund of the portion of the purchase price of the hearing aid and accessories as itemized on the receipt and above, less the cancellation fee stated above. If a cancellation fee is imposed the nonrefundable amount for each aid and accessories cannot exceed 10% of the purchase price of the hearing aid and accessories or $150.00 per aid and accessories, whichever is less. You will, however, be responsible for all nonrefundable service fees listed in Part A. If you cancel your order prior to delivery, you are entitled to full refund of the purchase price of the aid and accessories, and a full refund for services not yet rendered.

_____ Customer's Signature

_____ Date and time of Sale

_____ Registrant's Signature

_____ Registration No.

_____ DATE of DELIVERY

_____ Customer's Signature or Initials