



## Bulk Purchase Form

This offer was created for employers, groups and organizations with **ten or more individuals** who want to take advantage of online training discounts. Any combination of requests for ten or more purchases receives a discount.

- 10% discount for 10 - 19 employees
- 15% discount for 20 - 40 employees
- 20% discount for 40 - 99 employees
- 25% discount for 100 - 249 employees
- 30% discount for 250 - 349 employees
- 35% discount at 350 - 499 employees
- 45% discount at 500 or more employees

You may prepay by check, have the purchases billed to a single charge card or issue a purchase order and receive an invoice when the process is complete.

Add your information directly into this form, save and e-mail to [bulk@learnsomething.com](mailto:bulk@learnsomething.com) or you may print this form, complete the information and return it with your method of payment indicated or enclosed.

Each employee must have a unique Username which is usually an email address. If your employees do not have email addresses, or you choose not to use personal email accounts as identifiers, you may register employees using their first and last names. The Password does not need to be unique and may be the same for all employees in your location. If you have any questions, please don't hesitate to contact us.

Bulk Sales Coordinator  
LearnSomething.com, Inc.  
2457 Care Drive  
Tallahassee, FL 32308  
call 850 -385-7915  
fax 850 -385-7964

### **Bulk Purchase Form**

2457 Care Dr. Tallahassee FL 32308  
850 - 385-7915 voice 850 - 385-7964 fax  
[www.learnsomething.com](http://www.learnsomething.com)

Organization Name: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Contact Phone: \_\_\_\_\_

Contact E-mail: \_\_\_\_\_

Billing Address: \_\_\_\_\_

Association Name: \_\_\_\_\_

Total number of individuals for each course:

No.	Course Title	Price	Total
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**Payment Method:**

**check, enclosed**

**purchase order**, include: PO #: \_\_\_\_\_

**charge card**, include:

Name on Card: \_\_\_\_\_

Cardholder Address: \_\_\_\_\_

Acct #: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

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Attach additional pages as necessary to list all employees to be registered for online training.

	First Name	Last Name	Email Address	Password	Course
1					
2					
3					
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