

# de l'Epee Deaf Center, Inc.

## Interpreter Request Form

Phone: (228) 897-2280

FAX: (228) 897-2462

Today's Date: \_\_\_\_\_

DATE OF SERVICE: \_\_\_\_\_

TIME OF SERVICE: \_\_\_\_\_

EXPECTED DURATION: \_\_\_\_\_

### LOCATION OF SERVICES:

Address: \_\_\_\_\_ <-> Phone: \_\_\_\_\_

NAME OF DEAF PERSON: \_\_\_\_\_

REQUESTED BY: \_\_\_\_\_ <-> Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

COMPANY: \_\_\_\_\_ ATTN: \_\_\_\_\_

Mail ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

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### METHOD OF PAYMENT: (Please circle one)

Cash      Check      Master Card      Visa      Government Credit Card      Please Invoice

Authorizing Signature: \_\_\_\_\_ Purchase Order # \_\_\_\_\_

*All Requests MUST have a Signature*

**We will contact you for credit card information. Please do not include with this Request Form**

### CANCELLATION NOTICE

Canceled \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Will this assignment be rescheduled: (Circle one)      **YES**      **NO**

If Yes, give Date: \_\_\_\_\_ Time: \_\_\_\_\_

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Mississippi Senate Bill 2794, July 1, 2005 SS02/R907: No person shall provide interpreting services for consumers who are deaf or hard of hearing for a fee or other remuneration unless the person is registered with the registering authority.

de l'Epee Deaf Center is a Not for Profit 501 C3 organization. We are dependent on prompt payment for services and contributions. Please help us continue to provide for the Deaf and Hard of Hearing by supporting our mission.