**Please complete this work sheet the best you can and return to Customer Service by email at** **customerservice@cresthealthcare.com** **or by fax at 800-369-9207. If you have any questions, please call our Technical Service team at 800-328-8908.**

**Customer Information**

Date: Click here to enter a date.

Customer#: Click here to enter text.

Facility Name: Click here to enter text.

Number of Licensed Beds: Click here to enter text.

Ship to Address: Click here to enter text.

City/State/Zip: Click here to enter text.

Contact Name: Click here to enter text.

Title: Click here to enter text.

Phone#: Click here to enter text.

E-Mail: Click here to enter text.

**Nurse Call System & Pillow Speaker Information**

Nurse Call System (Brand and Series): Click here to enter text.

Plug Style: Click here to enter text.

(Note: ¼” Plugs Can Not Have Nurse Call & TV Audio Together)

(Rauland Resp5000 uses XN/XT04 8pin DIN)

Current Pillow Speaker Brand: Click here to enter text.

Current Pillow Speaker Part#: Click here to enter text.

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**Entertainment Environment**

1 TV per room with Multiple Beds: Yes [ ]  No[ ]

Multiple TVs per Room (IR Only): Yes [ ]  No [ ]

TV Brand: Choose an Item.

Other: Click here to enter text.

Model: Click here to enter text.

Is TV Hospital Grade: Yes [ ]  No [ ]

Smart TV: Yes[ ]  No[ ]

Interactive System Type: Choose an Item.

Other: Click here to enter text.

Interactive System Interface Type: TV based (ex. Pro:Centric) [ ]  External Digital Interface Box[ ]

Channel Control: Choose an Item.

Custom Feature(s): Click here to enter text.

Media Control: Choose an Item.

Set Top Box Brand: Click here to enter text.

Cable Provider: Click here to enter text.

Custom Features(s): Click here to enter text.

Media Player: Brand: Click here to enter text.

Model#: Click here to enter text.

Backlit: Yes [ ]  No [ ]  (RR5, Hill-Rom NaviCare, Amplion Only)

 **Crest Pillow Speaker Design**

Pillow Speaker Style: Choose an Item.

Nurse Call Interface Functions: Choose an Item.

Custom Features: Click here to enter text.

Volume Control Type: Digital

Headphone Option: Yes [ ]  No [ ]

Custom Case Feature: Choose an Item.

Other Custom Feature Requested: Click here to enter text.

Custom Feature Comments: Click here to enter text.

**For Crest Internal Use Only**

Remotes Needed/Incoming for Crest Code Capture: Yes [ ]  No [ ]

Crest Comments Regarding Incoming Remotes: Click here to enter text.

Technical Support Special Comments:

Part Number Assigned: Click here to enter text.

Sample Order Number: Click here to enter text.

Order Notes: Click here to enter text.

Assigned ISR: Choose an Item.