

Tidewater Lactation Group, Inc 4176 South Plaza Trail, Ste 217 Virginia Beach, VA 23452 757-422-5502 (phone) 757-455-8055 (fax) twlg@verizon.net

Tricare Breast Pump Order Form Contract

Patient Information	n: All Fields required		
Name (Mother):		Mothers Date of Birth:	
Street:		City/State/Zip:	
Phone:		Baby Date of Birth or Due Date:	
Sponsors Name:		Sponsors FULL SSN:	
Relationship to Sponsor:		Email Address:	
Select Your Pump):		
	Limerick PJ's Bliss Includes: 1.5 lb Pump, Power Supply, 2 Bottle Holder, PJ's Soft Touch Kit, Instructional Booklet, Cooler, Backpack and 1 Year Warranty		
	Spectra S2 Double Electric Pump Includes: Pump with Nightlight and Timer, Power Supply, Standard Kit and a 2 Year Warranty		
	Calypso to Go Breast Pump by Ardo Includes: Pump, Kit with Multiple Size Flanges, Cleaning Brush, Bottle Holder, Power Adapter, Bag and Instruction manual and a 400 hour/2 Year warranty		
	Medela Pump in Style Backpack I understand that this is an open air system pump Includes: Pump, Power Supply, Cooler Bag, 4 Containers with Lids, Standard Kit and a 1 Year Warranty		
Please ship my pump to the address above Please call me when my pump is ready for pick up			
Tricare will deny the claim if you have any other Insurance on file with them or if you have already received a pump or been reimbursed for a pump for this birth event.			
submit a claim to Tr	care on my behalf and that my p	escription, that I am authorizing Tidewater Lactation or strescription should be filed for records only and not ic personal information and will only be used in account	used again.
Sign Here		Date:	
Please send this completed form with your prescription to Tidewater Lactation Group			

Fax (757-455-8055) or Email us at: twlg@verizon.net or mail to above address