

IN-STEP MOBILITY PRODUCTS, INC.

8048 MONTICELLO AVE., SKOKIE, IL 60076 (847) 676-1275 FAX (847) 676-1202 (800) 558-7837 WWW.USTEP.COM

U-Step 2 Walker / LaserCane Sample Request Form

In-Step Mobility has set up a sample program to provide facilities with the U-Step 2 Walker and/or the LaserCane for patient assessment purposes.

Check Product(s) Requested:

____ U-Step 2 Walker with Laser/Sound Cueing Module

____ LaserCane

Facility Name: _____

Facility Contact: _____ Date of Request: _____

Title/Role: _____ Phone: _____

E-mail: _____ Fax: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Authorized Facility Signature: _____ Date: _____

Print Name of Authorized Facility Representative: _____

Return Completed U-Step 2 Walker / LaserCane Sample Request Form to Jonathan Miller:

scan / e-mail: jmiller@ustep.com fax: (847) 676-1202 Questions? phone: (847) 983-7690