

≡ **Audio Rescue** ≡



Please fill out this form, save a copy for yourself, and include a copy with your tapes as you send them to:

**Audio Rescue
106 Salem Drive
Forest VA 24551-1306**

Name: _____

Organization: _____

Email: _____

Phone: _____

Full Delivery Address (Not PO Box): _____

Individual Programs

Indicate your own tapeID. Include program lengths if you know them.

For each program, indicate for each program if you want extra high-quality WAV files, or an audio CD.

Client Tape ID	Program Title or Description	Approximate Program Length	Extra High-quality WAV Files ✓	Provide an audio CD ✓

Storage Option

Check Here to have all your programs returned a portable hard drive. (\$50 / free for 10 or more programs.)