Talk about making the right choice



Hamilton[®] CapTel[®] 840i

- Traditional button navigation for on-screen menus
- Size and feel of a traditional phone
- Built-in answering machine that captions messages



Hamilton[®] CapTel[®] 880i

- Extra-large font sizes and display options (optimal for people with low vision)
- Traditional button navigation for on-screen menus
- Built-in answering machine that captions messages

Hamilton[®] CapTel[®] 2400i

Hi Mom how are you today? that's great we are having a girls day and are planning on baking some cookies would you like to join us? how about coming over around 11 am? terrific

- Touch-screen navigation for on-screen menus
- Size and feel of a contemporary phone
- Bluetooth[®] connectivity, speakerphone & built-in answering machine that captions messages

There's no need to let hearing loss impact the connections that matter most in life. Whether it's with family, friends, business contacts or healthcare professionals, it's our ability to **connect, communicate and collaborate with others** that makes our lives whole. For people with hearing loss, a simple thing like a telephone conversation can become an obstacle. But with the right technology, that obstacle melts away, leaving meaningful connections that matter.

The Hamilton[®] CapTel[®] captioned telephone is the most advanced captioned phone available. It's possible to **listen and read captions of what's said over the phone** ensuring clarity on every call – eliminating the frustration even a simple phone call can make.

With a qualified hearing loss, you are eligible to **receive a Hamilton CapTel phone at no cost.**^{*} Choose the Hamilton CapTel phone that's right for you, complete the Certificate of Hearing Loss/Order Form with your healthcare professional and submit the form (see reverse).

Third-party charges may apply: the Hamilton CapTel phone requires telephone service and high-speed Internet access. Wi-Fi capable. Third-party trademarks mentioned are the property of their respective owners.

HWHL1014

Certificate of Hearing Loss/Order Form (HWHL1014)

To receive your Hamilton[®] CapTel[®] phone, please provide the requested information below.

APPLICANT INFORMATION *Required fields for processing. Please print.

YES, I have high-speed Internet and telephone service where the phone will be used. (Required for use of the Hamilton CapTel phone)
 Please select your Hamilton CapTel phone: CapTel 840i CapTel 880i CapTel 2400i
 I would like assistance with installation: Yes No

NO, I do not have high-speed Internet. Please contact me about other options. (Charges may apply depending on solution)

Applicant First Name*	Middle Initial	Last Name*		
Address*	City*		State*	ZIP*
Telephone Number*	Email* (Order confirmation purposes only)			

Alternative Contact

APPLICANT CERTIFICATION

I understand that Internet Protocol Captioned Telephone Service (IP CTS) is regulated and funded by the Federal Communications Commission (FCC) and in order to obtain a Hamilton CapTel phone at no cost, I must provide valid certification that I have a hearing loss necessitating the use of captioned telephone service. Hamilton CapTel is not responsible for charges incurred in obtaining certification. I also understand that I may be required to provide the last four digits of my social security number and date of birth upon registering my Hamilton CapTel phone.

Applicant Signature*

Date*

INDEPENDENT THIRD-PARTY PROFESSIONAL INFORMATION & CERTIFICATION *Required fields for processing. Please print.

Business/Agency*						
Address*		City*	State*	ZIP*		
Telephone Number*		Email*				
that the service is provided by a liv direct or indirect incentive (financi a TRS provider or its affiliates; and	e communications assistar al or otherwise) tied to this 4) I don't have a business (3 arrangement exists betwee	earing loss that necessitates the use it and is funded through a federal pro consumer's decision to use the serv other than providing this form), fami en myself/my organization and Ham t to consumers.	ogram; and 3) I have ice and I have not be ly or social relationsh	not been offered or provided any en referred to the applicant by nip with the TRS provider or its		
Please check only one* Physical PhysicaP	ician 🗌 Audiologist	Hearing-related Professional	Government/	Veterans Program		
Name*		Title*				
Signature*		Date*				
Applicant authorizes the professional na	med above to transmit this cert	ification and the information contained he	rein to Hamilton CapTel			
Please submit the signed cer	tification via one of th	e following methods:				

SCAN & EMAIL: Order@HeroesWithHearingLoss.org

FAX: 877-300-6686 (Verify fax delivery: call 877-455-4227 or email Order@HeroesWithHearinqLoss.org)

MAIL: Heroes With Hearing Loss Program • 1 Science Park • Frostburg, MD 21532

Upon receipt of your completed form, you will be contacted and must engage with a representative to verify delivery or requested installation support. If shipment is requested, the phone will ship from Weitbrecht Communications Inc. – please allow one to three weeks for delivery. For questions, contact Customer Care at 877-455-4227.

FEDERAL LAW PROHIBITS ANYONE BUT REGISTERED USERS WITH HEARING LOSS FROM USING INTERNET PROTOCOL (IP) CAPTIONED TELEPHONES WITH THE CAPTIONS TURNED ON. IP Captioned Telephone Service may use a live operator. The operator generates captions of what the other party to the call says. These captions are then sent to your phone. There is a cost for each minute of captions generated, paid from a federally administered fund. To learn more, visit fcc.gov. Copyright ©2020 Hamilton Relay. Hamilton is a registered trademark of Nedelco, Inc. d/b/a/ Hamilton Telecommunications. CapTel is a registered trademark of Ultratec, Inc.