

Exceed Technologies

Internet Subscription Agreement Form

Source: Yellow Pages Television Radio Referral _____ Other _____

Company Name If Corporate Account				
Name (First, MI, Last)			Social Security #	
Billing Address				
City		State		Zip code
Home Phone		Work Phone		Fax

Billing Method: Credit Card Bank Draft Check or Cash

Credit Card <input type="checkbox"/> Visa <input type="checkbox"/> MC	Card Number		Expiration Date	
	Name on Card			

BANK DRAFT CUSTOMERS	
<input type="checkbox"/> Bank Draft Customers must fill out a Bank Draft Authorization form and supply a VOIDED check from the appropriate account to: Exceed Technologies P.O. Box 8947 Columbus, MS 39705	

ACCOUNT OPTIONS	
CREDIT CARD OR BANK DRAFT PAYMENT	
<input type="checkbox"/> Unlimited Internet Access with One email account	\$15.95
<input type="checkbox"/> Prepayment Discount - six month signup	\$95.70
<input type="checkbox"/> Prepayment Discount - twelve month signup	\$191.40
<input type="checkbox"/> Additional email account - Per month charge	\$2.00
<input type="checkbox"/> Spam/AntiVirus Filtering - CC or BD - Annual Charge	\$19.95
<input type="checkbox"/> Other	
CHECK OR CASH PAYMENT (email statement each billing period)	
<input type="checkbox"/> Unlimited Internet Access with One email account + \$2 monthly processing fee	\$19.95 + \$2.00
<input type="checkbox"/> Prepayment Discount - six month signup + \$2 semi-annual processing fee	\$119.70 + \$2.00
<input type="checkbox"/> Prepayment Discount - twelve month signup + \$2 annual processing fee	\$239.40 + \$2.00
<input type="checkbox"/> Additional email account - Per month charge	\$2.00
<input type="checkbox"/> Spam/AntiVirus Filtering -Invoice - Annual Charge	\$21.95
<input type="checkbox"/> Other	

Please enter requested user ID's Below:			
User ID (6 - 8 characters all lower case)	Password (6 - 8 characters all lower case)	Full Access Or Email only	Email Address
			@exceedtech.net
			@exceedtech.net

CUSTOMER PAYMENT AGREEMENT:

I hereby authorize Exceed Technologies to pay my monthly Internet services account by charging each payment to my bank or credit card account and to make that deduction payable to the order of Exceed Technologies. I agree that each payment shall be the same as if it were an instrument personally signed by me. I agree that if a bankdraft payment is returned for insufficient funds, I will be charged a \$30 bounced check fee. This authority is to remain in effect until cancelled by me in writing. In addition, I have the right to stop payment of a charge by timely notification to my financial Institution and Exceed Technologies reserves the right to terminate this payment plan (or my participation therein). Furthermore, I understand that all forms must be signed and returned within 7 business days of activation or services will be terminated.

Signature	Title	Date	Agent

For Office Use Only	Date	Initials
<input type="checkbox"/> PBS	___/___/___	_____
<input type="checkbox"/> BDA <input type="checkbox"/> RVC	___/___/___	_____
<input type="checkbox"/> EMS	___/___/___	_____