

CALview NetLink

2175 De La Cruz Blvd., Suite 9
Santa Clara, CA 95050
Office: (408) 727-4601 Fax: (408) 727-4602

Date: _____

Sales Rep: _____

CONTACT OUR SALES DEPARTMENT AT: sales@calview.com

SUBSCRIPTION ORDER FORM

ATTENTION: DIAL-IN ACCOUNTS

Please complete this form, FAX or MAIL to CALVIEW NETLINK to setup account.

SERVICE TYPE:

() MONTHLY

() DIAL-IN ACCOUNT (28.8K / 33.6K / 56K)
"Unlimited Nationwide Access" \$ 19.95/month

Additional Services:

() WWW/FTP additional space \$1.00/mb per month

() Email Account(s) \$2.00/month

Note: Dial-in accounts includes 2emails, 10mb
of personal web space, and newsgroups.

COMPANY NAME: _____

LAST NAME: _____

FIRST NAME: _____

MAILING ADDRESS: _____

CITY: _____

STATE: _____

ZIP-CODE: _____

Contact Numbers:

Home # : (_____) _____

Work # : (_____) _____

PAYMENT METHOD

- () VISA
- () MASTERCARD
- () CHECK (Payable to Calview Netlink)
- () CASH

CREDIT CARD # : _____

EXPIRE DATE : _____

- Computer Used:**
- () IBM/PC
 - () MACINTOSH
 - () OTHER

- Operating System:**
- () Windows 3.1
 - () Windows 9x/Me/2000
 - () Windows NT
 - () Other _____

Login name: _____

Password: _____

1st Email: _____ @calview.com

Password: _____

2nd Email: _____ @calview.com

Password: _____

Customer Note:

Use lower case, uppercase letters and numbers only. You have 4 - 12 characters to fit as your login name and password. **(Please keep your username and password in a safe place)**. A Calview Netlink representative will be in contact with you prior to enrollment.

Notes to remember: