

CoolTrade Associate Software Sales Form

Date//		Referred By: Erik Henyon user Id ehenyon
Customer/Associate:		
Last Name	First Name	M.I
Street Address		
City, State, Zip	/	/
Home Phone #	Work Phone #	Cell #
Associate ID	E-mail Address	
Associate User Name:		
PAYMENT OPTIONS:		
Purchase Software, includes training: \$3,500.00 (Includes 6 years no maintenance - offer expires 3/31/2013 Midnight)		
Monthly Website Fee: \$19.95		
License Payment Information – TO COMPLETE, select the ONE payment option you prefer. Your credit card charge or check is your receipt.		
Bank Draft – Authorization for Electronic Transfer drawn by and Payable for License Fee: I hereby authorize CoolTraderPro, to charge/draft my checking/savings account from the Financial Institution listed below in the amount checked above.		
Name of Bank (Financial Institution)		Account #
Bank Address		Institutions Transit #
City State	ZIP	Signature of Acct Holder
Credit Card Authorization:		
Card #		Exp Date (Mo.Yr.) Security Code
Billing Address (if different from above)		
Cardholder Signature:		Mastercard Visa Discover Amex
FOR OFFICE USE ONLY:		
Date Payment Received//	_ RD NAME:	Phone #
Date Received by SRD//	Date Received by SD	_// Date Received by Company//