

Name: \_\_\_\_\_

**OFFICE ADDRESS:**

Brokerage Name: \_\_\_\_\_

Brokerage Address: \_\_\_\_\_

City: \_\_\_\_\_ Province/State: \_\_\_\_\_ Postal Code/Zip: \_\_\_\_\_

**CONTACT INFORMATION:**

Office Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Home Number: \_\_\_\_\_ Cell Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

**PAYMENT: \$149.00 +HST = \$168.37**

Payable: Circle one: VISA / MASTERCARD / AMEX

*\*We do not accept VISA Debit cards*

Name \_\_\_\_\_

Card Number \_\_\_\_\_ Exp \_\_\_\_\_

C.V.C: \_\_\_\_\_

**TERMS:**

Participant understands that this is a 30 day free trial period and that the participant can cancel the contract prior to the end of the free month at no charge. If the participant does not cancel the contract prior to the end of the free month the contract will continue on a month to month basis at a cost of \$149 + HST monthly.

\_\_\_\_\_  
Participants Signature\_\_\_\_\_  
Date\_\_\_\_\_  
Rob Vivian\_\_\_\_\_  
Date