



Date: _____

CLIENT NAME: _____

Contact: _____

Client Address: _____

Business Phone #: _____ Mobile Phone #: _____

Email: _____ Web Site URL: _____

Independent Agent: _____ Contract Start Date: _____

- SELECT PLAN***
- \$179.40 - mCard (annual)
 - \$14.95 - mCard (monthly)
 - \$99.95 - iConnect (monthly)
 - \$249.95 - iConnectPro (monthly)
 - \$1,500 - iConnect Unlimited (monthly)

*All monthly plans will auto renew monthly unless option is changed in clients online account management settings.

METHOD OF PAYMENT

PAYMENT AMOUNT

CREDIT CARD: # _____ Exp: _____

Name on Card: _____

Security Code: Amex (4 digits on front of card above card number) _____

MC/Visa (3 digits on back of card in signature line) _____

Billing Address (If different from Merchant Address) _____

SUB TOTAL \$ _____

DISCOUNT (if applicable) \$ _____

TOTAL \$ _____

AMOUNT PAID \$ _____

CHECK: # _____

NOTES _____

BY SIGNING THIS AGREEMENT, CUSTOMER AGREES TO BE BOUND BY THE TERMS AND CONDITIONS FOUND WITHIN CLIENT ACCOUNT FOUND AT WWW.IZIGG.COM. CUSTOMER WILL BE EMAILED A LOGIN PASSWORD/USERNAME.

CUSTOMER:

IZIGG:

By: _____ Date: _____

Name: _____

Title: _____

By: _____ Date: _____

Name: _____

Title: _____

CONTACT US

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online www.izigg.com



GO WHERE THE EYES ARE