

Dealer Name: **Liz Honey Promotions & Entertainment**
No. _____ Date submitted : _____ / _____ /2007



APPLICATION FORM

(To be signed and returned Attention to Pauline Peralta - Dealer Coordinator-02 8884 6107)

Last Name _____ Phone (Home) _____ (Work) _____
First Name _____ Mobile _____
Address _____ Date of Birth (dd/mm/yyyy) _____
_____ Postcode _____ Email address _____

Equipment Payment Plan (Inclusive of GST)

Effective : 22 January 2007

<i>Please tick one box only</i>	Installation	Equipment	IRD Box Shipping & Handling	Minimum Contract Term
<input type="checkbox"/> FULL SYSTEM - Outright*	<i>Waived</i>	\$99	<i>n/a</i>	<i>24 Months</i>
<input type="checkbox"/> IRD ONLY - Outright*	<i>n/a</i>	\$99	\$9	<i>12 Months</i>

Subscription: Terms::

1. **Monthly subscription is \$32.99**
2. **One (1) month advance subscription fee is required (prior to activation).**
3. **Activation Fees are waived.**
4. **Pre-termination Fee of \$300 applies plus Outstanding Balance**

Notes:

Other Fees may apply: Travel Charges (if more than 40 kms from capital cities), additional equipment or service, 3-storey, Pot Plant Installation, etc

I agree to subscribe to the Filipino Service and to the Purchase Plan of equipment in accordance with the Subscription and Equipment Purchase Plans indicated above.

I acknowledge that I have read, understood & agreed to the Standard Customer Agreement (Effectivity 8/7/2006) and the policy provided to me with this Application Form and agree to be bound by the terms and conditions contained on those documents.

Mere activation, since this was requested by you, means you understood, agreed and are bound to follow all terms and conditions (including charges set in the Price Guide) set by ABS-CBN.

Signature: _____ Date: _____

INITIAL PAYMENT METHOD (Credit Cards Accepted: Visa and MasterCard only)

I would like to place my order for equipment and subscription as above and make my initial payment of \$ _____ by
 Cash Cheque Money Order as attached, or by Credit Card Number _____
Name on Card: _____ Expiry date _____ Cardholder's Signature _____