



Internet Services Order Form
Intranet Hosting Service
(www.webintranet.net)

This request for SelectNet services is bound by the Terms and Conditions of Service and the Acceptable Use Policies as posted on the SelectNet Web site (http://www.select.net) and modified from time to time.

Domain Name: _____ (must be a valid domain name)

Note: We will setup a subdomain for the domain you choose to use for your intranet service. For example, if you choose to use "yourdomain.com", we will setup a subdomain "webintranet.yourdomain.com" to use for the intranet service.

Desired Admin Login ID*: _____ Desired Admin Password*: _____

* Case sensitive, no spaces allowed. Passwords should be 6 to 12 characters, using a combination of letters and numbers.

Services Ordered

Please check the package desired (for details, please visit http://www.webintranet.net):

Hosting Packages (select one)

Billing Cycle (Contract Term)

Table with columns for Hosting Packages (5 user to 500 user) and Billing Cycle (Monthly/Yearly) with associated prices.

All plans include 100 MB of total storage. Additional storage space may be purchased at the following rate:

Table showing storage upgrade rates: First 100 MB INCLUDED, +25 MB Blocks \$4.50/mo, +100 MB Blocks \$12.00/mo, +500 MB Blocks \$40.00/mo.



Customer Information (This is the entity contracting with SelectNet for services)

Organization _____

First Name _____ Last Name _____

Phone _____ Fax _____ E-Mail _____

Address _____

City _____ State/Province _____

Zip/Postal Code _____ Country _____

Billing Contact Name: _____ Tech Contact Name: _____

Billing Contact Email: _____ Tech contact Email: _____

Billing Contact Phone: _____ Tech Contact Phone: _____

Payment Information

Payment Type: Credit Card Check

Billing Cycle (contract term): As selected above in the "Services" section

Credit Card Information:

Visa MasterCard AMEX

Card Number _____ Expire Date ____ / ____

Name (as on card) _____

Address: _____

_____ Zip: _____

A check or credit card payment equal to the first billing cycle payment must accompany this Application.

Use my credit card for the first billing cycle payment.

Use my credit card for subsequent billing cycles.

Invoice me for subsequent billing cycles.

I authorize **SelectNet Internet Services** to invoice me or bill my credit card as indicated above according to the payment plan and package chosen on this order form. I am aware of any extra charges that may occur by going over my package's allowance for disk storage and/or data transfer. I have read and agree to SelectNet's **Terms and Conditions of Service** and **Acceptable Use Policies**. I understand that with this signature I bind myself to all legal agreements with SelectNet and the services that they provide.

Name: _____ **Date:** _____

Signature: _____