

Name:		Title:	
Mobile Phone:	Office Phone:	Company:	
Office Address:	City:	Province:	Postal Code:
Shipping Address:	City:	Province:	Postal Code:
Email:		Website:	

Program Pricing Details

- Mail transportation fee of \$15.00 for each distribution
- Non-refundable annual fee of \$240.00

Distribution Schedule

Products	Price	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
<u>Postcard</u>	\$1.17	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>Newsletter</u>	\$1.48	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Newsletter Content Options & Order Details

<input type="checkbox"/> RECIPE (on Pg. 4 of newsletter)	<input type="checkbox"/> MAILED Newsletters _____ QTY. x \$1.48 = \$ _____
<input type="checkbox"/> MARKET STATS (on Pg. 1 of newsletter)	Mail Transportation Fee: \$15.00 = \$ _____
Real Estate Board:	<input type="checkbox"/> OFFICE Newsletters _____ QTY. x \$0.73 = \$ _____
_____	(25 Minimum) Handling Fee: \$15.00 = \$ _____
_____	Shipping Fee: TBD* = \$ _____
_____	<input type="checkbox"/> Envelopes _____ QTY. x \$0.15 = \$ _____
	<input type="checkbox"/> I would like my Office Newsletters folded 6" x 9"
	Annual Fee: = \$ 240.00
	Total = \$ _____

The non-refundable annual fee will be applied on the first issue invoice and again on each anniversary thereafter. Annual fee will be charged on the first contracted issue if the issue is not produced. Charges may vary based on mailing list quantity at the time of production. Prices subject to change without advanced notice and should be verified at the time of order. Applicable taxes extra.

*Shipping fee is based on destination and will be calculated at the time of ordering.

Accepted Payment Methods

How to provide your credit card information: **Call our office** and provide it over the phone. We accept Visa or Mastercard for payment. **Please note:** Debit cards are not accepted. For your protection, please **DO NOT** email or fax your credit card information.



Order Authorization

I authorize **JumpTools®** to process charges to my credit card on an ongoing basis as per my order above. This authorization is to remain in effect until **JumpTools®** has received written notification of termination from me in such time and in such manner as to afford **JumpTools®** a reasonable opportunity to cancel my order in a timely and favourable fashion. Charges to your credit card will appear as: JumpTools Inc.

LIMITATION OF LIABILITY: **JumpTools®** sole liability to the customer or any third party for claims, notwithstanding the forms of such claims, for any error or omission in the service, or late delivery or unavailability of the services, shall be to correct the error and provide the services as promptly as possible. In no event will **JumpTools®** be responsible for special, indirect, incidental or consequential damages which the customer may incur or experience on account of entering into or relying on this agreement. The customer hereby releases and forever discharges **JumpTools®** for any and all action, claims, demands, costs, expenses and compensation whatsoever, in connection with the foregoing.

Client Signature: _____ Today's Date: