

**I authorize Crossroads Intl Com., Inc. and/or Thin Air Com., Inc. to automatically charge my account listed below, and I am authorized to do so:**

*Credit Card Choice ( 3.00% credit card surcharge, \$2.00 minimum )*

**Credit Card Type:**  
 Visa                       MasterCard                       American Express

**Credit Card Number:**  
    -     -     -

**Name as it appears on Card:** [ \_\_\_\_\_ ]

**Expiration Date:**                        /    
   Month                      Year

*Bank Account Choice ( Direct Debit, NO surcharge )*

**Account Name:** [ \_\_\_\_\_ ]

**Type:**  Checking                       Savings

**Account Number:**  
 Routing number                      Account number  
 ||          ||     

**Name of Bank:** [ \_\_\_\_\_ ]

**Your Accounts Payable Email Address:** [ \_\_\_\_\_ ]

**Your Accounts Payable Fax Number :** [ ( \_\_\_ ) \_\_\_ - \_\_\_\_\_ ]

**Your Accounts Payable Phone Number:** [ ( \_\_\_ ) \_\_\_ - \_\_\_\_\_ ]

**Billing Cycle:**     Monthly     Quarterly     Semi Annually     Annually

**Member is a:**                      **Member Fed. Tax I.D./ Social Security Number**  
 Corporation                      [ \_\_\_\_\_ ]  
 Partnership  
 Sole Proprietorship                      **Tax Exempt**                       Yes                       No  
 Other [ \_\_\_\_\_ ]

THE UNDERSIGNED HAS READ THIS AGREEMENT INCLUDING THE TERMS AND CONDITIONS AND EXHIBITS, STATEMENT OF WORK AND PRICING, ALL OF WHICH ARE INCORPORATED HEREIN AND BY HIS/HER SIGNATURE ACKNOWLEDGES RECEIPT OF A COPY OF THIS AGREEMENT AND AGREES TO THE TERMS AND CONDITIONS HEREIN. SUBSCRIBER HEREBY AUTHORIZES CROSSROADS INTERNATIONAL COMMUNICATIONS INC., TO MAKE INQUIRIES CONCERNING SUBSCRIBER'S CREDIT WORTHINESS AND HEREBY AUTHORIZES FINANCIAL INSTITUTIONS, VENDORS AND OTHERS TO DISCLOSE CREDIT INFORMATION TO CROSSROADS INTERNATIONAL COMMUNICATIONS, INC. THE SUBSCRIBER UNDERSTANDS THAT THE SERVICE IS PROVIDED AS IS WITH NO IMPLIED WARRANTIES OR GUARANTEES WHATSOEVER.

[ \_\_\_\_\_ ]  
 SUBSCRIBER NAME (Please print)

[ \_\_\_\_\_ ]  
 SUBSCRIBER SIGNATURE

[ \_\_\_\_\_ ]  
 DATE