

|                                                                                   |                                             |                                        |
|-----------------------------------------------------------------------------------|---------------------------------------------|----------------------------------------|
|  | PO Box 16068<br>Panorama<br>Cape Town, 7506 | Tel: 021 930 0442<br>Fax: 086 605 4455 |
|                                                                                   | www.chill-e.com                             | Registration No:                       |
|                                                                                   | info@chill-e.com                            | 2008/259091/23                         |
|                                                                                   |                                             |                                        |

| Customer Details |  |
|------------------|--|
| Name:            |  |
| Surname:         |  |
| Contact No:      |  |
| Email Address:   |  |

| Product Choice                                     |                                                          |
|----------------------------------------------------|----------------------------------------------------------|
| <b>Personalized Email Special (R199pm)</b>         | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Domain name of choice:<br>(e.g www.yourname.co.za) |                                                          |
| Date to commence:                                  |                                                          |
|                                                    |                                                          |
| <b>Chill-e ADSL Special (R45pm per Gig)</b>        | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Amount of Gigs @ R45pm per Gig:                    |                                                          |
| Date to commence:                                  |                                                          |

| Payment Details                      |                                                                                   |
|--------------------------------------|-----------------------------------------------------------------------------------|
| Method of payment                    | Debit order <input type="checkbox"/> EFT <input type="checkbox"/>                 |
| If debit order select day of choice: | 1 <sup>st</sup> <input type="checkbox"/> 7 <sup>th</sup> <input type="checkbox"/> |

| Acceptance of Terms                                                                                                                                                                                                                                                                                                                                                             |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <p>I, The undersigned, hereby agree to accept the product/s of choice as chosen above with a clear understanding of what the product/s entail. I am aware that I shall be liable for all monthly charges that are incurred from the above product/s choice/s.</p> <p>Should the need arise Chill-e Software Solutions has the right to terminate any of the above products.</p> |  |
| Full name and surname:                                                                                                                                                                                                                                                                                                                                                          |  |
| Date:                                                                                                                                                                                                                                                                                                                                                                           |  |
| Signature:                                                                                                                                                                                                                                                                                                                                                                      |  |