



SP Diagnostics

Subscription Form

Congratulations on deciding to take out your SPi / G2 subscription using the new Direct Debit option. This allows you to pay for your subscription in easy monthly amounts.

By using your SPi or G2 at least once a week for either a service reset or diagnosis, you more than cover the cost of the subscription.

Please note: If you choose to take the postal card update option rather than using the Internet there is an extra charge for the cards and administration of the facility. The Internet update option is the preferred method, it gives you much better access to the latest updates, and as soon as new software is released you can update your unit, saving you time and giving you even better value for money.

Please tick the correct order box below, fill out your customer details, your email address is important as we use this to notify you of new updates. Complete the initial payment boxes (we often take the initial payment separately and not via direct debit). Then sign and date the form at the bottom.

Monthly Direct Debit Order - all prices include VAT at 17.5% (Please tick one only)		18/01/10
Internet Updates		SD Card Postal Updates
<input type="checkbox"/> iMAP - £42.24		<input type="checkbox"/> MAP - £44.59
<input type="checkbox"/> iMAP+iKeys - £52.82		<input type="checkbox"/> MAP+Keys - £55.17
<input type="checkbox"/> iKeys - £21.09		<input type="checkbox"/> Keys - £23.44
<input type="checkbox"/> Other - _____		

Customer Details - * Please ensure your details are correct	
Name:	<input type="text"/>
Company:	<input type="text"/>
Address:	<input type="text"/>
Post Code:	<input type="text"/>
Telephone:	<input type="text"/>
Mobile:	<input type="text"/>
Email Address:*	<input type="text"/>
Account/Customer #:	<input type="text"/>
	Initial Payment: * To ensure your subscription starts as soon as possible, please enter your card details: Visa <input type="checkbox"/> Visa Debit <input type="checkbox"/> Mastercard <input type="checkbox"/> Maestro <input type="checkbox"/> Cheque <input type="checkbox"/> - Payable to SP Diagnostics Card Number: <input type="text"/> Start Date: <input type="text"/> Issue: <input type="text"/> Exp Date: <input type="text"/> 3 digit number on reverse of card: <input type="text"/>

Confirmation	
By signing this form you agree to subscribe to the above service, paid monthly, minimum 12 month term, and confirm that you have authority to place this order. Should you cancel this contract before the end of the term, you will still be liable for the remaining outstanding amount. Direct Debit payments will be taken on or around the 1st of each month for the amount shown above, according to your subscription.	
Name:	<input type="text"/>
Signed:	<input type="text"/>
Date:	<input type="text"/>
Sales Ref:	<input type="text"/>
	<input type="text"/>