

# Broadband Internet Registration Form

# sowega.net

## internet solutions

PO Box 488 Vienna, Ga. 31092  
229-874-2230 229-268-0230 800-267-2053

Please complete one form for each account requested - one user per account.  
Please fax back to 229-268-0001 or mail to the address above.

Referred by:

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## Authorized User or Administrator

First Name	MI	Last Name	Organization	
Street Address		EMAIL ADDRESS	Fax	
		@	( )	
City	State	Zip Code	Day Phone	Evening Phone
			( )	( )

## Credit Information

Social Security #	-	-	DL#	DOB	/	/
Billing Method	Bank Draft		Credit Card		Check/Money Order	
	<input type="checkbox"/> Monthly	<input type="checkbox"/> Annually	<input type="checkbox"/> Monthly	<input type="checkbox"/> Annually	<input type="checkbox"/> Monthly	<input type="checkbox"/> Annually

**Login Name** – Lower case only. Minimum of three characters, nine characters or more \$1 additional per month, maximum of sixteen characters, and cannot contain special characters. Please make three choices in case of collision with existing names. **Password - minimum of ten characters, must contain alpha and numeric characters. Cannot be the same as login name.**

Login Name (First choice)	Login Name (Second choice)	Login Name (Third choice)	Password <small>(must use numbers &amp; letters)</small>
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**I have read all the pages of this agreement and agree to Sowega.Net's Terms and Conditions. By signing this contract, I agree that I am at least 18 years of age and legally bound by this contract. If I am not 18 years of age, the signature below is of a parent or legal guardian that agrees to be held responsible for the actions of the account applicant.**

Signature	Date
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## Credit Card Information *(if applicable)*

<input type="checkbox"/> Visa <input type="checkbox"/> Master Card	Exp. Date /	Name On Card	Card Number
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Billing city and zip code (where your credit card statements are mailed) \_\_\_\_\_  
Email Address for Receipts \_\_\_\_\_

**Credit card accounts are on an auto-renewal basis. I authorize Sowega.Net to charge my account for those charges that I may accrue according to selected billing cycle. This authorization is valid until revoked in writing.**

I authorize Sowega.Net to charge to the credit card number above any setup fee and recurring service charges indicated on the Schedule of Fees.

Signature	Date Signed
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