

My Rainbow Career Finder

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TERMS OF CONTRACT

Name of Organization:

Number of New Student/User Accounts:

Cost:

Date of Sale:

Please confirm your agreement of the above terms by completing the form, printing your information below and return to us by e-mail (learning4life.az@gmail.com), mail or FAX (602-569-9640). When we receive this agreement, your product will be shipped.

Name of Organization: _____

Address: _____

City : _____ State: _____ Zip: _____

Your Name: _____

Your Title: _____

Phone _____

E-Mail: _____

Signature: _____ Date: _____

BY HOLLANDCODES.COM

Date: _____

Print Name: _____

Signature: _____

Title: _____