ORDER FORM

To order an X-Formation product, fill out and sign this form, then scan and email it to sales@x-formation.com. Please contact us for pricing information.

Company Data

Company Name: ______________________
Address: ____________________________
ZIP/Postal Code: _____________________
Country: _____________________________
Direct Phone: ________________________
Email: ______________________________
  (technical issues)
Currency: ____________________________
  (choose from EUR, USD, DKK)
City: ________________________________
VAT (for EU): ________________________
Company Phone: _____________________
Email: ______________________________
  (financial issues)

Notes

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☐ Monthly subscription

Number of activations: __________

☐ Quaterly payment

☐ Annual payment

☐ One-time activations

Number of activations: __________

Signature

By signing below, you authorise X-Formation to process your order as indicated in this form.

Date __________ Printed Name __________ Signature __________

By signing this form I consent to X-Formation collecting and storing my data from this form for the purposes described in the following documents:

Privacy Statement - www.x-formation.com/company/privacy-statement/
Terms of Service - www.x-formation.com/company/terms-of-service/