

PUREJOIN ORDER FORM

T. 678) 206-0500 . F. 678) 205-4884 . sales@purejoin.com . 3473 Satellite Blvd Suite 202N Duluth GA 30096

Http://merchant.purejoin.com

Please fill out this form and email/fax to us (sales@purejoin.com | (678) 205-4884). We will set up and deliver your system to the address below. You will be contacted by our customer service agent for training and further assistance..

ORDER # : _____ DATE : _____
AGENCY : _____
AGENT : _____

PUREJOIN hardware will be preconfigured and shipped to your store within 10 business days after receiving application.

NOTE :

Company Name _____ Name _____
Address _____ Phone# _____
City, State, Zip _____ Email _____

I, _____, authorize PureJOIN Inc. to charge my banking account or credit card listed below, For PureJOIN Subscription, amount of \$ _____ will be charged every month until I request service cancellation. I also authorize PureJOIN Inc. to charge \$ _____ .
(Hardware \$ _____ Shipping \$ _____ Sales Tax \$ _____)

PureJOIN POS & Reward

1 Register Monthly Fee (\$59.99) – Cloud, Software, Data Service, Tech Support

___ x Additional Register Monthly Fee (\$29.99)

___ x POS Hardware Essential (\$2409) - iPad Pro 12.9" | iPad Stand | Thermal Receipt Printer | Reward Display | Cash Drawer & Cable | Teemi 2D Scanner | PAX S300

___ x POS Hardware Pro (\$2609) - iPad Pro 12.9" | iPad Stand | Thermal Receipt Printer | Reward Display | Cash Drawer & Cable | Card Reader | Symbol DS 2278 Scanner | PAX S300

___ Reward Program Single Store Monthly Fee (\$69.99)

My bank account information is as follows:

Customer's Name (as it appears on Bank account): _____

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Bank Name: _____
Bank Account Type: Checking Savings Business Checking
Bank ABA Routing Number: _____
Bank Account Number: _____

**A
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This payment authorization is valid and to remain in effect unless I, _____ notify PureJOIN Inc. of its cancellation by sending written notice to (PureJOIN Inc.: fax 678)205-4884 or email to help@purejoin.com).

Customer Name Printed _____

Customer Signature _____ Date _____

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Card Holder Name _____

Card Number _____

Expiration ____/____

CVV _____ (3 digit number on back of card)

Billing Zip Code _____

SIGNATURE _____

DATE _____

PureJOIN Inventory

_____ x Inventory & Labeling Kit (\$1285) - Tablet | Scanner | Portable Label
Tablet Holder | Printer | 1 Case Of Label

Selected hardware will be charged by selected payment method on the right column. Shipping and Sales Tax will be added.

Hardware and Monthly Service Charges are not refundable

All Prices are subject to be changed without prior notice