

New Customer Sign Up Form with K9 Pooper Scooper

NAME: _____

STREET ADDRESS: _____

CITY: _____ ZIPCODE: _____

EMAIL: _____ (NEEDS TO BE AN EMAIL YOU CHECK FREQUENTLY, DUE TO INVOICES, SCHEDULE CHANGE, HOLIDAYS.)

BILLING NAME AND ADDRESS IF DIFFERENT:

NAME: _____ STREET: _____

CITY: _____ ZIPCODE: _____

PHONE: _____

NUMBER OD DOGS: _____ HOW OFTEN: _____ (WEEKLY, EVERY OTHER WEEK, MONTHLY, TWICE A WEEK)

START DATE: _____

SPECIAL INSTRUCTIONS FOR US:

REFERRALS: _____ (GOOGLE WEBSITE FRIEND/FAMILY)

^CIRCLE ONE^

- IF YOU REFER SOMEONE YOU WILL GET HALF OFF YOUR NEXT BILLING CYCLE. ONLY COUNTS FOR SOMEONE WHO SIGNS UP FOR A SUBSCRIPTION NOT A ONE TIME CLEAN.

BILLING OPTION: WE HIGHLY RECOMMEND AUTO PAY WITH CREDIT/DEBIT CARDS.

CREDIT/DEBIT CARD INFO: CARD TYPE: _____ (VISA, MASTERCARD)

CARD NUMBER: _____

EXPIRATION: _____

ZIP CODE FOR BILLING: _____

NAME ON CARD: _____

- THERE WILL BE AN AUTOMATIC WITHDRAW FOR PAYMENT CHARGED THE 1ST OF EVERY MONTH

I HAVE READ AND UNDERSTAND PAYMENT TERMS AND AUTHORIZE POOPSIE DAISY INC (DBA K-9 POOPER SCOOPER) TO CHARGE MY ACCOUNT ON A MONTHLY BASIS.

Card Holder: (PRINT) _____

Signature: **X** _____ Date: _____