

Go Figure Account Update Form – INTERNATIONAL

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PLEASE FILL OUT THIS FORM COMPLETELY - INCOMPLETE FORMS WILL DELAY PROCESSING PLEASE FILL OUT A SEPARATE FORM FOR EACH CLUB

Existing Customer Go Figure Customer ID #:									
Owner's Name:			Phone #:						
Club Address:		-		Ste.	/Apt. #:				
City, State/Province:		Postal/Zip (Code:		Country:				
Club Phone Number:									
Club Fax Number:									
Email:									
Billing Address:	Same as Club Address			Ste.	/Apt. #:				
City, State/Province:		Postal/Zip Code:			Country:				

License Fee Agreement

The iGo Figure[®] monthly licensing fee will be automatically charged to your account on or about the 15th of every month for each facility location that uses iGo Figure[®]. Technical support and software updates for the purchased version are included with the monthly licensing fee. The license fee includes three concurrent logins per facility location (for cloud-based iGo360) or up to three networked computers (for version 3). I understand that I am purchasing a license(s) to use the iGo Figure Software. I understand that I must pay the applicable license fees (plus tax where required by law) for each facility that I own that uses the iGo Figure[®] program, and that if I do not pay the fee, Go Figure may terminate this agreement and cutoff my access to the software. I authorize Go Figure, Inc., to charge my account for all charges, fees and any other charges I incur. I understand that my use of the iGo Figure Software is governed by the software license agreement included with the program. I understand that prices and fees are subject to change. 15% restocking fee on returned equipment.

NEW Credit Card Information Please fill out the account information below. Your purchase and your monthly license fee will be charged to this account.										
Credit Card	□ AMEX □ VISA	☐ MC ☐ DISC	Name on Card		Acct. #		Exp. Date: Mo Yr			

I have read the above statement and agree to have the account above or any other account I have on file with Go Figure charged for the fees for services and products I inciur.

Owner Signature:____

Printed Name: _

www.igofigure.com

FAX TO ACCOUNTING DEPARTMENT AT +1 832 327 8861

7 Mar 2019

Date (MM/DD/YYYY):