

PRODUCT REGISTRATION FORM

Please complete this registration form and fax/send it back to:

ITMS Ltd.
P.O BOX 375
Kingston, Surrey KT1 2YG
Tel(Sales): 0181-549 1437
fax: 0181-9746574

TIP: USE SuperVoice/SuperFax to fax this form back...
Please fill the form out in CAPITALS

PRODUCT REGISTRATION FORM

PRODUCT: NETFAST!PRO 1.0 32Bit

SURNAME:

FIRSTNAME:

COMPANY:

DIVISION:

STREET ADDRESS:

TOWN:

COUNTY:

COUNTRY:

POSTCODE:

TELEPHONE:

FAX:

E-MAIL:

MODEM BRAND:

MODEM TYPE: VOICE/FAX/DATA OR FAX/DATA

DATE OF PURCHASE:

WHAT SYSTEM ARE YOU RUNNING: WINDOW 3.X /WINDOWS 95

SUGGESTIONS FOR THE PROGRAM:

**PLEASE DO NOT REMOVE OR TYPE ANYTHING BEYOND THIS LAST LINE!
END OF PRODUCT REGISTRATION FORM**