

Lakewood Studios Fax/Mail Order Form

Order on-line at: www.lakewoodstudios.com

Date: _____

Name: _____

Company: _____

Billing Address: _____

City: _____ State: _____

Country: _____ Zip: _____

Telephone: _____

E:mail: _____

Credit Card: American Express Discover

Mastercard VISA

Cardholder: _____

Card Number: _____

Expiry Date: _____

Signature: _____

I wish to order: This is an educational order.

____ licenses for iList Studio @ \$_____ U.S. per license = \$_____ Total Price
(Canadian Residents please add 7% GST.)

Serial Code: _____

Please mail the completed form to: **Lakewood Studios, 190 Highway 20 West, Suite 306A, Ridgville, Ontario, Canada, L0S 1M0.**