Qarbon ViewletCentral Subscription Form
Education Pricing

All orders are for 12 months pre-paid.
Please fill out this form and email, fax or mail it back to Qarbon.

Qarbon – 111 N. Market St., Suite 1240 – San Jose CA 95113 - USA
Phone: (408) 907-4801 – Fax: (408) 907-4808 – Email: customer_service@qarbon.com

Choose your Plan	Offering	Licensed*	Unlicensed**
Bronze Plan	Up to **5** Viewlets	**$230.00** For **12** months	**$459.00** For **12** months
Silver Plan	Up to **10** Viewlets	**$404.00** For **12** months	**$817.00** For **12** months
Gold Plan	Up to **25** Viewlets	**$872.00** For **12** months	**$1,818.00** For **12** months
Platinum Plan	Up to **50** Viewlets	**$1,598.00** For **12** months	**$3,381.00** For **12** months

Please, indicate your choice:

Type of Plan: (Bronze -> Platinum)	**Licensed or Unlicensed?**	**Subscription price:**

* Licensed pricing requires that you purchase our Desktop Software (ViewletBuilder or ViewletQuiz)
** Unlicensed pricing lets you use for free our Desktop Software (ViewletBuilder or ViewletQuiz)
** Whatever happens first requires that you shift to the next Plan or limit your use of ViewletCentral
Important Note: Your Qarbon ViewletCentral account, and the content within the account, is protected by a Login and Password. Viewlets you publish on ViewletCentral can only be accessed by those you choose to receive the link generated by ViewletCentral.
For greater security you may add a Login and Password to each of your Viewlets.

Billing information: (Must be filled out)	Should you need more space or more views than the Gold Plan, please call Qarbon's Sales Team: (408) 907-4810 or email **sales@qarbon.com**
Company name:	
Address:	
City:	Indicate your choice of Login and Password: **Login must be the email address of the main user (Manager) of the ViewletCentral account.**
State: Zip:	
Country:	
Purchaser's name:	Login/e-mail:
Phone:	Password:
Fax:	Once connected, you will be able to change the password and add other users to this account
E-mail:	

Please choose a mode of payment:		
[ ] Credit Card		
Card type: __ Visa __MC __AMEX	Card number:	Expires:
Card Security Code:_____	Name as displayed on card: _____	
Do not forget your Card Security Code (CSC) a 3 or 4 digit number that is typically printed on the back of your credit card.		
[ ] Check included		
[ ] Purchase Order – Mail or fax to: 111 N. Market St., Suite 1240 - San Jose, CA 95113 - USA - Fax: 408 907-4808		