## SONIC.

## Account Transfer Form

Username		Date	/	/	_
I give Sonic.net, Ir specified below.	nc. authorization to transfer my existing	account services a	and terms to the	new account holde	er
Current Accou	unt Holder Information:				
Print Name					
Signature					
Contact #					
Service Addres	ss				

I, the new account holder, agree to the terms and conditions outlined in the <u>Acceptable Use Policy (AUP)</u> and any other terms that may apply depending on the services listed on the current account, such as DSL, Colocation, T1, etc. (If you are unsure of these other terms, please give our billing department a call.)

## New Account Holder Information:

Print Name	
Signature	
Billing Address	(If you wish the Billing Address to match the current Service Address please write "Same as Service")
Email Address	
Phone Number	By providing your mobile number, you authorize Sonic to send SMS
Mobile Number	messages related to your order and service. Message frequency varies and data rates may apply. Reply "HELP" for help or "STOP" to cancel.

\*All services require a valid Visa/MasterCard, or linked bank account on file for automatic billing. To update your payment method, please log in to <u>Member Tools</u> or call Billing at (888) 766-4233.

Payment information must be updated within 10 days of account transfer to avoid possible service disruption.