Account Transfer Form

Username _____
Date _____/_____/_____

I give Sonic.net, Inc. authorization to transfer my existing account services and terms to the new account holder specified below.

Current Account Holder Information:

Print Name _____

Signature _____

Contact # _____

I, the new account holder, agree to the terms and conditions outlined in the Acceptable Use Policy (AUP) at www.sonic.net/aup 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 _____
_____

Contact Numbers ( ) - Fax number ( ) -

Email address _____

New Credit Card Information
__ __ __ __ - __ __ __ __ - __ __ __ __ - __ __ __ __
3 digit security code __ __ __ Expiration Date __ __ / __ __