

Mail-in Subscription Form

Yes, I want a one-year subscription to eztales.com as indicated below.

- Single School, Public Library or Organization Subscription: \$199.00 per year
 School District or Public Library System Subscription: \$199.00* per year per school or branch

- Single Classroom Subscription: \$79.00 per year
 Single Household Subscription: \$59.00 per year

SCHOOL, SCHOOL DISTRICT, LIBRARY OR ORGANIZATION SUBSCRIPTION

Name of INDIVIDUAL School, Public Library or Organization _____ \$ 199.00

School District, Public Library System or Organization Name _____

Total # of Schools or Branches _____ x \$199.00* per school or branch

Total \$ _____

School District or Branch Library Discounts (if applicable) _____

Less 10% Discount \$ _____

Total Amount due for a School District, Library System or multiple locations for an Organization Net Total \$ _____

Contact Name and Email _____

CLASSROOM SUBSCRIPTION \$79.00 per year per Classroom

School Name and Address _____

Total # of Classrooms _____ x \$79.00 per classroom

Total \$ _____

Teacher Name & Email _____

Contact Name & Email (if different) _____

HOUSEHOLD SUBSCRIPTION \$59.00 per year per Household

Customer Name _____

Customer Email _____

Total # of Households _____ x \$59.00 per year

Total \$ _____

If subscription(s) is for a different address other than the customer's, please list email(s) on a separate sheet, for notification of subscription(s).

BILLING AND LOGIN INFORMATION

Name _____

Billing Address _____

City _____ State _____ Zip _____

Phone _____

Chose a **User Name** _____

Choose a **Password** _____

Use to login to your account. Must be 4 or more characters.
It can contain small letters, numbers and underscore characters.

Must be 4 or more characters. Note: User name and password are case sensitive;
when logging in, please enter just as you show here.

Please remember your personal User Name and Password to access EZTales.com Member's Area.

If more than one subscription, please add additional User names and Passwords on a separate sheet. Your user name and password are good for all subscriber locations and computers.

METHOD OF PAYMENT

- Enclosed is our check or money order in the amount of \$ _____
Payable to EZTales (Check# _____)

- Enclosed is our purchase order number _____
(School, School District, Classroom, Day Care, PTA and Library)

- Credit Card: VISA/MC/AMEX/DISCOVER Number _____ / _____ / _____ / _____
Expires: _____ / _____ 3-digit security code (on back of card) _____ AMEX 4-digit security code (on front of card) _____
(Month) (Year)

Card Holder Signature _____

If paying by credit card, please sign this form above. If paying by other method, please include your check number or purchase order number with this form.

Send form to:

EZ Tales

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