



SERVICE AGREEMENT

(866) 800-HOLD (SALES)
 (866) 700-HOLD (FAX)
 (866) 200-HOLD (STUDIO)

Sales Person: _____

COMPANY NAME _____


SCRIPTING CONTACT _____

SECOND CONTACT _____

ADDRESS _____ SUITE _____ CITY _____ STATE _____ ZIP _____

PHONE _____ FAX _____

WEB SITE ADDRESS _____ E-MAIL ADDRESS _____

Package	Rate (month)	Payment	Totals	<u>AOH REFERRAL PROGRAM</u>
Premium	\$ 39	Monthly On-Hold Service / 1 st Loc:	\$ 39	AOH WILL REIMBURSE YOU ONE MONTHS PAYMENT OF ONE LOCATION FOR ANY REFERRAL YOU GIVE US THAT BECOMES A CLIENT 
Term: <u> 1 </u> year		Other:	\$	
Duplicate of US-AC sponsored messages updated year round		Set Up:	\$200	
Total Number of Locations: <u> 1 </u>		Total Due:	\$ 200	
Equipment: (1) Network Unit				



AOH RESPONSIBILITIES :

1. Definitions:
 - Production: Any change to words, voice talent, music, sound effects, etc...
 - Custom: A unique script.
 - Duplicate: An exact copy of a Custom script.
 - Location Tag: One unique paragraph, recorded one time, and doesn't change when the rest of the production updates.
2. AOH will deliver production within 5 working days of script approval.
3. All productions are 100% satisfaction guaranteed.
4. AOH will provide the following: • Professional Voice Talent • Professional script writing • **Licensed** copy, music, and sound effects.
5. Use of AOH digital equipment included. AOH warranties the equipment for the term of the agreement.

CLIENT RESPONSIBILITIES

6. **This is a non-cancelable contract for the term of the agreement. This agreement automatically renews each year for 1 year unless either party notifies the other, in writing, of its desire to cancel within thirty (30) days before the end of the contract term.** Additionally, the client will be responsible for the monthly billing until the equipment has been returned and received by AOH and the licensed production is not in use.
7. Client agrees to protect the equipment from any unreasonable wear and tear, or use other than it is intended (MOH and Music).
8. Client has use of the licensed productions only at the number of locations listed above ("Total Number of Locations") and agrees to pay for any additional locations that are using the licensed productions. A location is defined as any facility with a US Postal address.
9. Client agrees to pay bill when due. If client fails to pay any amount when due, a late fee-finance charge may be added to the amount due at a rate of 2% per month from the date due until the date such amount is paid full. In the event that this account is placed with a collection agency, Client agrees to pay the fees of the collection agency equal to the maximum of 50 percent of its outstanding balance at the time the account is placed with the agency. Additionally, the amount due will include the remaining months of the contract accelerated to the end of the contract. Interest of 10% per year will be accrued on the principal balance placed with the agency. Should legal action also be necessary to collect the account, Client agrees to pay attorney's fees and court costs incurred for collection. Clients agree that venue for legal action shall remain in the courts of Maricopa County, Arizona.

Signature Client _____ Date: _____ AOH _____ Date: _____



**AUTHORIZATION AGREEMENT FOR
PAYMENTS**

COMPANY NAME: _____

I (We) hereby authorize **America On Hold**, hereinafter called COMPANY, to initiate debit entries to my (our) Credit Card and /or Checking account indicated below from the depository name below, hereinafter called DEPOSITORY to debit the same to such account.

Credit Card Information

Credit card type: **Visa**, **MasterCard**, **Amex**, **Discover**

Cardholders name (as shown on credit card): _____

Credit card number: _____

Expires: _____ Security code from back of card _____

Cardholders' Zip Code (required) (from credit card billing address): _____

OR

ACH from Checking or Savings Account

DEPOSITORY BANK NAME: _____

BRANCH: _____

CITY: _____ STATE: _____ ZIP: _____

TRANSIT ABA NUMBER: _____

ACCOUNT NUMBER: _____

This authority is to remain in full force and effect until Company and DEPOSITORY has received written notification from me (or either of us) of its termination in such time and in such manner as to afford COMPANY and DEPOSITORY a reasonable opportunity to act on it. I (or either of us) have the right to stop payment of a debit entry by notification to DEPOSITORY at such time as to afford DEPOSITORY a reasonable opportunity to act on it prior to charging account. After account has been charged, I have the right to have the amount of an erroneous debit immediately credited to my account by DEPOSITORY, provided I (we) send written notice of such debit entry in error to DEPOSITORY within 15 days following issuance of the account statement or 45 days after posting whichever occurs first.

*Note: Please **attach a voided check** from the account to be debited so that we may verify your bank's Federal Reserve Transit ABA Number for debit processing.*

PRINT NAME: _____

SIGNED: _____ **DATE:** _____

(866) 800-4653 phone

(866) 700-4653 fax

Admin@AmericaOnHold.com