



Date: _____

Name: _____

Address: _____

City: _____

State: _____

Country: _____

Postal/Zip Code: _____ Phone _____

Date of Original Purchase: _____

Where did you purchase your Canine Training Systems® Product? _____

Video Title to Upgrade: _____

Is your video title NTSC or PAL format? _____

Was this your first Canine Training Systems® product? _____

Credit Card Type (Visa, MC, Disc, Amex): _____

Credit Card Number: _____ exp. _____

Check # _____

Signature: _____

How did you hear about us?:

Advertisement _____

Wholesaler _____

Friend _____

Banner Ad _____

Web Link _____

Trade Show _____

Direct Mail _____

Magazine _____

Borrowed a Video _____

Referral _____

Broadcast E-mail _____

Other _____

We appreciate your business! Thank You.

The Trendsetter in Canine Performance Video!™