



FAX #: (323) 290-7135 PHONE#: (323) 290-7132 MAIL: 3870 CRENSHAW BLVD 204 LOS ANGELES, CA 90008
SUBSCRIPTION AGREEMENT

(FILL UP THIS FORM AND MAIL OR FAX TO RETRAN)

THIS AGREEMENT is made by between Retran, Inc. , hereinafter referred to as "RETRAN" and

NAME _____ email (will be your username) _____

STREET ADDRESS (no post office boxes) _____

CITY _____ STATE _____ ZIP _____ PHONE _____

Hereinafter referred to as "SUBSCRIBER"

RETRAN grants to SUBSCRIBER during the term a right of access to the data in the RETRAN System (www.retran.net) using 2 terminal(s) at any given time with a limited, non-exclusive, nontransferable license to use data, copyrighted or copyrightable by RETRAN.

SUBSCRIBER shall pay a NON-REFUNDABLE amount of \$ _____ as an account establishment fee and a monthly subscription fee totaling to the sum of the cost of selected services below:

[] LOS ANGELES (\$159/month) initials _____ [] ORANGE (\$99/month) initials _____
[] RIVERSIDE (\$99/month) initials _____ [] SAN BERNARDINO (\$99/month) initials _____
[] SAN DIEGO (\$99/month) initials _____ [] VENTURA (\$99/month) initials _____

OR

[] OTHERS, please specify county: _____, price: _____

OR

[] ALL (LA, OC, RI, SB, SD, VE) (\$339/month) initials _____

,which applies to Subscribers monthly online usage starting from receipt of this form.

This agreement shall RENEW automatically for like terms unless canceled within 30 days notice before the next billing due.

SUBSCRIBER acknowledges that this is a website membership and NO refunds or credits are given to any unused months while the account is active.

SUBSCRIBER shall provide for all telephone lines, charges and other equipments necessary to access the RETRAN System.

RETRAN System is provided on "as is" basis. Neither RETRAN nor its suppliers make any warranties, expressed or implied, including, without limitation, those of merchantability and fitness for a particular purpose, with respect to the RETRAN System.

SUBSCRIBER WILL NOT REPRODUCE, SELL, PUBLISH OR IN ANY MANNER COMMERCIALY EXPLOIT ANY INFORMATION OBTAINED THROUGH THE RETRAN SYSTEM EITHER BY ITSELF OR TO ENHANCE ANOTHER PRODUCT, OR PARTICIPATE IN OR ALLOW SUCH REPRODUCTION, SALE, PUBLICATION OR EXPLOITATION BY ANY PERSON, EXCEPT WITH THE EXPRESS WRITTEN CONSENT OF RETRAN.

SUBSCRIBER shall maintain confidentiality of its SUBSCRIBER password(s) at all times and take responsibility for its/their security.

This agreement is subject to credit approval at the discretion of RETRAN.

CREDIT CARD INFORMATION:

CREDIT CARD #: _____

EXPIRATION DATE: _____ TYPE [] AMEX [] MASTERCARD [] VISA

AVS / 3 OR 4 DIGIT SECURITY NUMBER (behind the card): _____

NAME (as it appears on credit card): _____

BILLING STREET ADDRESS: _____

BILLING CITY, STATE and ZIP: _____

SIGNATURE OF CARD OWNER: _____

SIGNATURE _____

TITLE _____

COMPANY NAME _____

DATE _____