



609 Broadway Blvd. NE Albuquerque NM
505-369-7979
www.cibolawireless.net

Wireless Broadband Service Application

Full Name OR Company Name: _____

Contact Person (if applicable): _____

Service Location Address: _____ City: _____ State: _____ Zip: _____

Phone: (____) _____ Alternate Phone: (____) _____ Fax: _____

Drivers License# _____ OR NM CRS # _____ OR SS# _____

Billing Contact: _____ Billing Email Address: _____

Billing Address if different from above:

Address: _____ City: _____ State: _____ Zip: _____

How did you hear about us? _____

By signing this **Wireless Broadband Service Application** I acknowledge the above information is correct as of the date signed and the signature listed below has the authority to enter into this contract for the company named above, and is responsible for payment, any late charges and/or collection fees on this account. I will read and agree to the **Wireless Service Agreement**. I agree to inform Cibola Wireless of any changes in the above information in a timely fashion.

Signature: _____ Date: _____

Credit Card Information- I authorize Cibola Wireless, or its authorized agent to charge my credit card account each month for the account(s) specified herein. This authorization is valid until revoked in writing, with at least ten (10) days prior notice to Cibola LLC. Charges will appear on billing statement as "Cibola LLC." Cibola LLC reserves the right to charge a late fee for credit card denials.

Service Package _____ Initial Installation Fee\$ _____ Monthly Recurring Fee \$ _____

Type of Credit Card (check one): Visa ___ MasterCard ___ Discover ___ American Express ___

Please Print name as it appears on card: _____

Card Number: _____ Expires: _____

Card Holders Signature: _____