



WebSphere Everyplace Access services offer

Company name

Name

Address

Mailing address (if different)

City State/Province

ZIP/Postal code

E-mail address

Daytime phone

Program number/part number acquired Date acquired

Send this completed form via fax to international telephone number 44-1962-816800 no later than January 10, 2003. An IBM services representative will contact you within five business days after receipt of this form to arrange the initial requirements and scope of work two-day meeting. The remaining days of no-charge services must be completed no later than 60 calendar days from the date of the initial two-day meeting or February 28, 2003, whichever occurs first.

I certify by my signature that the information I have entered on this enrollment form is accurate and complete.

Name (please print)

Signature Date