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### Domain Registration and Hosting Information Form

**\*\*Domain Registration and Hosting Fees are non-Refundable\*\***

Please fill out the following required information so that we may register your domain and/or set up a hosting account for you. **Please type or print clearly.** If you already have a domain name, fill in that domain name and indicate it is already registered. *Domain Registration fees are non-refundable once we register the domain name for you.*

If we will be registering a new domain for you, try to come up with 3 possible domain names in order of preference. If you need assistance with this please call us. Occasionally all 3 of your choices are unavailable. If this occurs, we will call or email you and request some additional choices from you.

Domain registrars require an email address for contact about your domain. Instructions regarding domains must come from this registered email address, so be sure it belongs to someone in your company with the authority to okay any changes made to registered website information.

The username and password below are required for access to your Control Panel / FTP for your domain. Passwords must be at least 6 characters long and include at least one number, one uppercase letter and one lowercase letter. Passwords are case-sensitive.

Preferred

Domain Name: 1. \_\_\_\_\_  
2. \_\_\_\_\_  
3. \_\_\_\_\_

Hosting: *Unix:*  Bargain \$7.95/mo., *Discount of 20% applied to Bargain plan ONLY for annual payment, total of \$76.32/year*  
*Linux or Windows*  
 E-commerce \$10.95/mo.  
*(includes dedicated IP address)*

Preferred Hosting Billing Period (circle one): 1mo. 3mo. 1 yr. (20% discount for 12mo, Bargain plan only)  
**Please note:** *If you are using a credit card payment for HOSTING, you must choose 1 mo. billing period.*

Desired Username:  
*(Use 8 characters maximum. We will match it as closely as possible.)* \_\_\_\_\_

Desired Password:  
*(must at least 8 characters and include at least one number, one uppercase letter, and one lowercase letter)* \_\_\_\_\_

Contact Name: \_\_\_\_\_  
FIRST LAST

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: ( ) \_\_\_\_\_ - \_\_\_\_\_ Fax: (optional): ( ) \_\_\_\_\_ - \_\_\_\_\_  
AREA CODE AREA CODE

Email Address: \_\_\_\_\_

Signature: \_\_\_\_\_

This form may be faxed to (828) 891-2169, or you can email the required information to:  
[pat@tonerdesign.com](mailto:pat@tonerdesign.com)