

# Subscription and Technical Assistance Agreement

Date

Organization

CUSTOMER ID.  Provided by HighScope

New Account  Renewal  Addendum  College Lab Acct.  Educational Purpose Only



## COR Advantage License Information:

License Manager   
Title   
Center/Agency  Optional  
#Sites/Centers  Optional  
Address 1   
Address 2   
City   
State/Province   
Zip/Postal Code  Country   
Phone   
Fax   
E-mail (required)

## Bill to Information:

Same as License Information on left  
Name   
Institution   
Department   
Address 1   
Address 2   
City   
State/Province   
Zip/Postal Code  Country   
Billing Contact Phone   
Billing Contact Fax   
E-mail (required)

Program Type:  Infant/Toddler  Preschool  Family Child Care

## Subscription License Terms:

Plans:  Standard  Limited  
No. of Child Licenses   
Price/Child   
Additional Archive  @\$.75 each  
Total Contract   
Subscription Start Date   
Expiration Date

This agreement will provide a subscription to COR Advantage and technical assistance, provided by Red-e Set Grow, LLC, for the licensed users for the time period indicated. This agreement is non-refundable. If additional licenses are needed, an addendum to this agreement will be provided. The signatures below provide acceptance of the Terms and Conditions of this Agreement between the above-mentioned organization, HighScope Educational Research Foundation, and Red-e Set Grow, LLC, and payment for services provided. This contract is complete when this Agreement, which also incorporates the Web Hosting Agreement, and the COR Advantage Privacy and Terms of Use, has been signed. Once payment is received, Red-e Set Grow will contact subscriber with set-up instructions.

## Payment Method:

Check (Check # required) \* Purchase Order # (required) \* \*Please attach copy  
 Credit Card:  Master Card  Visa  AmEx  Discover  
Card Number  Expiration Date  Cardholder Signature

I acknowledge that I have been provided a copy of the Web Hosting Agreement and agree to the terms. I also agree to the COR Advantage Privacy and Terms of Use, and I agree to the Subscription License Terms outlined above. I further agree to pay for the license outlined above.

\_\_\_\_\_  
(Print Name and Title)

\_\_\_\_\_  
HighScope Educational Research Foundation

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
Red-e Set Grow, LLC

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

Please fax this form with purchase order/payment to:

734.485.5560, or mail to HighScope — COR Advantage, 600 North River Street, Ypsilanti, MI 48198  
If you have questions, please contact us at 800-587-5639, ext. 234 or 206, or e-mail CORTeam@HighScope.org