



# DIRECTV® Promotional System Activation and Annual Programming Agreement

## Promotional Receiver Activation and Equipment Lease Agreement

Thank you for choosing to purchase DIRECTV. By signing this Agreement, Customer (hereafter referred to as "I"/"me"/"you"/"your") agrees to abide by the following terms and conditions:

Within 30 days of receipt of your DIRECTV System equipment, you agree to activate a DIRECTV programming package. You also agree to activate DIRECTV programming on any additional receivers (\$4.99 per month per additional receiver) and maintain your DIRECTV subscription. Existing DIRECTV customers may activate receivers with their existing DIRECTV programming package.

**Consequences of Your Failure to Activate Programming:** If you fail to activate your DIRECTV System receiver within 30 days of receipt from KVH, you agree that KVH may charge a fee of one hundred fifty U.S. dollars (\$150.00), as liquidated damages, per DIRECTV System receiver that is not activated.

**Consequences of Terminating the DIRECTV Subscription:** Termination of the DIRECTV subscription will require the return of the leased receiver and/or early termination fees.

**THIS PROGRAMMING AGREEMENT IS SEPARATE AND DIFFERENT FROM ANY OTHER ANNUAL AGREEMENT YOU MAY HAVE PREVIOUSLY MADE WITH DIRECTV AND IS FULLY ENFORCEABLE UNDER THESE TERMS.**

**DIRECTV Customer Agreement:** You hereby agree and acknowledge that this DIRECTV Annual Programming Agreement sets forth additional terms and conditions regarding your receipt of DIRECTV programming, receipt of your leased receiver, and activation of access cards and shall be applied in conjunction with the DIRECTV Customer Agreement, a copy of which is provided at DIRECTV.com and with your first bill.

### Customer Information: (\* fields are required for processing)

\*First Name \_\_\_\_\_ MI \_\_\_\_\_ \*Last Name \_\_\_\_\_

\*Street Address \_\_\_\_\_ County \_\_\_\_\_

\*City \_\_\_\_\_ \*State \_\_\_\_\_ \*Zip \_\_\_\_\_

\*Phone \_\_\_\_\_ E-mail \_\_\_\_\_

\*SS#    -   -

\*Credit Card #                 \*Exp. Date        
(MM) (YYYY)

\*AMEX  VISA  MASTERCARD  DISCOVER

\*KVH TracVision Product Model \_\_\_\_\_ \*KVH Dealer \_\_\_\_\_

\*Serial # \_\_\_\_\_ \*Scheduled Installation Date \_\_\_\_\_

### Shipping Information: (\* fields are required for processing)

\*Customer or Dealership Name \_\_\_\_\_

\*Street Address \_\_\_\_\_

\*City \_\_\_\_\_ \*State \_\_\_\_\_ \*Zip \_\_\_\_\_

\*Phone \_\_\_\_\_

**Note: a \$29.00 shipping and handling fee will be charged to the credit card designated above.**

**I WARRANT THAT I AM 18 YEARS OLD OR OLDER AND THAT ALL INFORMATION SUPPLIED BY OR ABOUT ME IS ACCURATE. BY SIGNING BELOW, I HEREBY AUTHORIZE AND AGREE THAT KVH INDUSTRIES, INC., MAY, AT ITS SOLE OPTION, CHARGE THE FEES DESCRIBED HEREIN TO THE CREDIT CARD DESIGNATED ABOVE. I HAVE READ AND AGREE TO THE ABOVE TERMS AND CONDITIONS.**

\*Customer Signature \_\_\_\_\_ \*Date \_\_\_\_\_

#### Information on Receiver Supplied by KVH

(DO NOT WRITE IN THIS SECTION - TO BE COMPLETED BY KVH)

Model \_\_\_\_\_

Serial # \_\_\_\_\_

Access Card #              
(fill in all 12 digits - including zeros)

#### Customer-owned Receiver Information

| Brand/Model | Serial # | Access Card # |
|-------------|----------|---------------|
|             |          |               |
|             |          |               |
|             |          |               |
|             |          |               |

**Fax this form to 401-851-3823. This is a SECURE Fax Machine. Please contact DIRECTV for final activation processing; call: 1-800-DIRECTV**