Top Pay Fax Registration

Please complete and fax to Aatrix Software at (701) 746-4393. We will send a return fax with your registration number.

Customer Information

Name _____
First Last Middle

Company _____

Title _____

Address1 _____

Address2 _____

City_____ State_____ Zip Code _____

Phone (____) _____-_____

Fax (____) _____-_____

Email _____

Computer System Information

Computer

- ☐ Power PC Mac
- ☐ iBook
- ☐ PowerBook
- ☐ iMac
- ☐ G3 Mac
- ☐ G4 Mac
- ☐ Other_____

Operating System

- ☐ OS 9.0
- ☐ OS 9.1
- ☐ OS 9.2
- ☐ OS X.0
- ☐ OS X.1
- ☐ OS X.2
- ☐ Other_____

Internet Connection

- ☐ Dial-Up (Modem Speed _____)
- ☐ DSL
- ☐ T1
- ☐ Cable Internet
- ☐ Other _____

Company Information

Type of Business _____

Number of Employees

- ☐ 1-10
- ☐ 11 – 25
- ☐ 26 – 50
- ☐ 51 – 100
- ☐ 101 – 250
- ☐ 251 – 500
- ☐ Over 500