

**Gemini 24/7 Locate
Service Activation Form
Fax to: 1-207-221-1442**

Account/Primary User Information *Denotes required fields

The Phone Number and Zip Code of the Primary User will be the Username and Password for the online account.

*First Name: _____ Middle Initial: _____

*Last Name: _____

*Street: _____

*City: _____

*State: _____ *Zip Code: _____ This **zip code** is your online account **Password**.

*Home Phone Number: _____ This **phone number** is your online account **Username**.

*Work Phone Number: _____ *SSN: _____

Email Address: _____

Payment Method

Check One: American Express _____ Mastercard _____ Visa _____ Discover _____

*Credit Card Number: _____ *Expiration Date: _____

CVV number: _____

Name on Credit Card: _____

Billing Address for Credit Card: _____

Device Information	Device 1	Device 2	Device 3	Device 4
Device ID# (10 digits)				
Device Phone #				

**The above information is found on a label on the end of the device box.
Device ID is the 10 digit # underneath the barcode and the Device Phone # is the 10 digit Tel#:*

Monthly Service Plan Type (Please check only one)

- Bronze (\$19.95 per month) _____
- Gold (\$29.95 per month) _____
- Platinum (\$39.95 per month) _____
- Fleet – number of devices _____

*Monthly service plans require a 2 year contract. The cellular portion of each plan is subject to federal and state taxes, fees and surcharges. Service does not include any voice usage charges. Voice and unit overages will be billed to the above credit card account monthly. Please see Terms and Conditions for details.

I agree to purchase the Gemini 24/7 Locate Service for the designated minimum term of 2 years. I also understand and agree that I will incur an Early Termination Fee equal to the lesser of \$175 or the combined monthly service charges for the remainder of the contract period should I terminate prior to the end of my contract period. In addition, I agree to the Terms and Conditions and authorize future monthly service charges and overages to be billed to the above credit card account until the term of the contract expires or the contract is terminated.

Authorized Customer Signature Date

Print Name

Customer Service 1-800-894-8074