



HEWLETT-PACKARD (Canada) Co.

NUANS[®] Application Form

***Company Name:** _____
Address: _____
Address: _____
City: _____
Province: _____
Postal Code: _____
***Phone Number:** _____
***Fax Number:** _____
***Email Address:** _____

***Do you wish to have your contact information published on the NUANS Web Site?** **YES** **NO**

If YES, Web address: _____

1- Billing Contact Name: _____
Phone Number: _____
Fax Number: _____
Email Address: _____

2- Administrative Contact Name: _____
Phone Number: _____
Fax Number: _____
Email Address: _____

3- Technical Contact Name: _____
Phone Number: _____
Fax Number: _____
Email Address: _____

