

*****EVOCATION APPLICATION FORM*****

Please fill out the form completely so as to avoid delays in the shipment of your game.
If possible, also indicate a fax number maybe of your office or a friend of yours.

The undersigned _____ wants to receive the complete version
of the "Evocation •The Final Challenge" video game at the following address:

Name and Surname _____

Address _____

Country _____

Telephone _____ Fax _____

I will pay the sum of \$20, inclusive of the shipping charges, for delivery by air mail

(so as to reduce your waiting times), through

[] Credit Card nr. _ _ _ _ - _ _ _ - _ _ _ _

(the credit card must belong to the group VISA/MASTERCARD/EUROCARD)

Expiry date ___/___

Belonging to _____

Born on ____ / ____ / _____

The sum of \$20 enclosed with this Form.

Date _____

Signature _____

DEDALOMEDIA SOFTWARE ENGINEERING
VIA DON GIUSEPPE LAGO, 52 • 35013 CITTADELLA LOC. LAGHI (PD) • ITALY

TELEPHONE +39.49.9422115 • FAX +39.49.9422099

APPLELINK ITA0749•INTERNET ITA0784@APPLELINK.APPLE.COM