

Order Form

CLIENT Name:	Company Name:
Billing Address:	City: State: Zip:
Domain Name:	Email:
Birth Date: ___ / ___ / _____ (security question)	Phone:

CLICKS Project Services:

Project Status	___ New Project ___ Project Update	
Project:	___ SEO ___ Website ___ PPC ___ Display Ads	Setup Fee: \$ _____ Monthly Fee: \$ _____ Fee: \$ _____ Fee: \$ _____ Google Budget: \$ _____ Fee: \$ _____ AdRoll Budget: \$ _____
Keyword Category:	Orlando Family Law	
Third Party Marketing Budget:	\$ _____ (when needed . Client advised prior to spend)	
Setup Date: (fee billed)	___/01/____ OR ___/15/____	
SEO Start Date: (fee billed)	___/01/____ OR ___/15/____ (billed same day every month)	
IMPORTANT: If you are building a website, your SEO will launch prior to website launch, optimizing select third-party directory listings.		

Notes / A la Carte / Additional Services:

Payment

Name on Credit Card:	Card Type:	(Discover not accepted)
Credit Card #:	Exp Date:	CVV:

I agree to pay the amounts above for the Project Services requested in this Order Form, all in accordance with the terms and conditions of the Service Agreement located on our web site at _____, which terms and conditions I acknowledge are incorporated into this Order Form by reference. I authorize the charges to my credit card for the fees specified herein and agree to be automatically billed the setup fee & monthly fee starting no later than the above Setup Bill Date & SEO Billing Start Date or any other date stated herein. Additionally I authorize the use of the Third Party Marketing Budget to be used by Get The Clicks to pay third party vendors for services provided on my behalf as part of the Project Services.

Signature Print ___ / ___ / _____
Date

Return order form to billing@gettheclinks.com or fax 407-374-1564

Office Use Only			
S	CC A/Q _____	Box _____	INV _____
M	CC A/Q _____	Box _____	INV _____
O	CC A/Q _____	Box _____	INV _____