



# School Registration Form



## Section A

### School information

School name:

Province:

District:

Circuit (if applicable):

Physical address:

Contact person:

Contact email:

## Section B

### Purchase information

Total number of licences required:

Select the licence type (select only one option):

Demo  
only\*

Full  
game

Please send this form to your sales rep or email it to [orders@papadigames.com](mailto:orders@papadigames.com)  
If you have any queries, please email [support@papadigames.com](mailto:support@papadigames.com)

FOR OFFICE USE ONLY:

Sales rep:

Date order form received: