



Yearly Upgrade Program (YUP) Submittal

Note: This form is a mandatory requirement and must accompany all YUP purchase orders

Dealer Name: _____

Address: _____

Telephone #: _____

Contact Name: _____ Email address: _____

Purchase order number: _____

End User Name: _____

Address: _____

Telephone Number: _____

Contact Name: _____ Email address: _____

YUP Part number purchased:

CA-YUP-1 _____	CA-YUP-5 _____	CA-YUP-10 _____
CA-YUP1-1 _____	CA-YUP1-5 _____	CA-YUP1-10 _____
CA-YUP2-1 _____	CA-YUP2-5 _____	CA-YUP2-10 _____
CA-YUP3-1 _____	CA-YUP3-5 _____	CA-YUP3-10 _____

Dealer Contact Signature: _____ Date: _____

Please note: Your signature on this submittal constitutes your agreement to allow Continental Access permission to invoice your organization for a 3 year renewal of your YUP on the 1 year anniversary date of purchase.

(Please fill out, print & fax form to 631-842-9135)