

## **APPLICATION AND AGREEMENT**

E-Sign or send photograph to: info@mediagarden.co

Business Information					
Business Name					
Address		_ City	State	ZIP	
Business Phone		_ Website			
Owner Name		_ Business Email			
Mobile Phone		_ Personal Email			
MediaGarden Online Prese	ence Managemen	<b>it</b> (Check appropriate box	es)		
☐ FINDABLITIY	• Google & Bing Ma • Google Posts: 1X p • Listings distributi				
☐ WEBSITE	<ul><li> 3 Page custom we</li><li> 30 Minutes per we</li><li> Professional responsable</li></ul>				
□ SOCIAL	Social media man     Social media post     Facebook Boost a	s: 3X per wk			
<ul> <li>VIDEO &amp; PHOTO</li> <li>Custom Video Production: 1X</li> <li>Video/Photo On Location: 1-x</li> <li>Uploaded to Website - With 1</li> </ul>		ocation: 1-2hr 1X Quarter			
VIDEO PLUS 1 VI	DEO PLUS 2	EO PLUS 2 Pick 4		Own Your Market	
				PICK 4 + SEO 5 keywords	
SEO x 5 keywords*  *\$300/mo. per additional 5 keywords  *\$00/mo. per additional 5 keywords  *\$4 SEO ranking campaign: 5 keywords  • Relevant authority website backlinks  • Monthly keyword related content					
☐ ADS ☐ Google ☐ Traffic E☐ Up to \$  ☐ Bing ☐ \$1,500 - \$3,000 - \$3,000 - \$1,000 - \$	1,500 \$200/mo. \$3,000 \$400	Estimated Monthly Traffic Budget:			
Ads are month-to-month. Pause anytime.	Your traffic budget will not	flow through Media Garden.			
Promo Code:			Total: Setup Fee	Monthly	
Set-up Fee + First Monthly Payment	→ First Payment To	otal:			
<b>Term of this Agreement is ONE (1) year.</b> The undersigned applicant represents that all information provided by applicant is true and correct. If Media Garden accepts this application, applicant hereby agrees and accepts all Terms and Conditions posted at <b>www.mediagarden.co/agreement</b> and acknowledges that all applicable Agreements located there will govern the relationship with Media Garden.					
APPLICANT SIGNATURE	PRINT	ED NAME	TITLE	DATE	
WHEN ACCEPT	ED BY MEDIA GARDEN, T	HIS WILL BE THE APPLICATION	AND AGREEMENT.		
Contractor:	ID#:				

ACCEPTED BY Media Garden





Business Information		
Business Name	Address	
Business Name	Address	
	City, State, ZIP	
Payment		
CHECKING INFORMATION		
Routing # (9 DIGITS) Checking A	ecount #	
CREDIT CARD INFORMATION		
☐ VISA ☐ MASTERCARD ☐ AMEX ☐ DISCOVE	VER	
	/	
Credit Card #	Card Expiration (MM/YYYY)	
Billing Information (Cardholder or Bank Acco	unt Holder)	
	·	
Name (Cardholder <u>or</u> Bank Account Holder)		
Billing Address	City, State, ZIP	
Phone Number	Email	
The undersigned authorizes Media Garden to initiate and honor charge Media Garden - 141 Waldorf St. Springfield, MA. 01109	s by the payment method indicated to:	
One-time Setup Fee will be charged with first billing occurring within programs, applications dated PRIOR to the 15th of the month to be billed on the 20th of the month.		
Media Garden account maintenance fee of \$100.00 will be charge AUTHORIZATION: All Agreements will remain in effect until the companner as described in such Agreements. Agreements shall only be effect.	pany has received notification from me that it is to be to	erminated in such a
I authorize Media Garden to initiate Automated debit entries to my acco	ount with the depository named above.	
Signature		
CARDHOLDER or BANK ACCOUNT HOLDER	PRINTED NAME	DATE
SignatureAPPLICANT (only if different from ACCOUNT HOLDER)	PRINTED NAME	DATE