

PRODUCT REGISTRATION FORM

IMS-1000

PROTECT YOUR IMS-1000 INVESTMENT!

**REGISTER YOUR SYSTEM TODAY
and receive these important benefits.**

✓ **Warranty Protection**

Completion of the Product Registration form confirms your participation in the Sensaphone IMS-1000 fantastic 3-year limited warranty program.

✓ **Software Protection**

Registration ensures that you'll receive notices about enhancements to your IMS-1000 firmware and software as well as information about system upgrades.

✓ **New Product Features and Accessories**

As new features, sensors, and accessories become available, you'll be the first in the industry to learn of these exciting new developments.

**3 Easy
Ways to
Register!**



MAIL with the enclosed prepaid envelope



FAX to 610-558-0222 for faster registration



On the WEB at www.sensaphone.com/registration/form.html

Turn over page for registration form



PRODUCT REGISTRATION

To keep your IMS-1000 up to date, complete this registration form and mail it to Phonetics, Inc. with the enclosed pre-paid envelope or fax it to 610-558-0222.

You may also register your IMS-1000 online at www.sensaphone.com/registration/form.html

Company

Name

Suite, Building, Floor

Address

City State Zip

Telephone

E-Mail Address

Date of Purchase Purchased From

Serial Numbers of the IMS-1000 Host or Nodes

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Serial Numbers of the IMS-1000 Host or Nodes

1. Primary business activity performed at this location:

(Select only one)

- | | |
|--|---|
| <input type="checkbox"/> Aerospace | <input type="checkbox"/> Insurance |
| <input type="checkbox"/> Construction | <input type="checkbox"/> Utilities/Energy |
| <input type="checkbox"/> Engineering | <input type="checkbox"/> Finance/Banking |
| <input type="checkbox"/> Pharma/Life Science | <input type="checkbox"/> Communications |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Non-Profit |
| <input type="checkbox"/> Real Estate | <input type="checkbox"/> Government/Federal |
| <input type="checkbox"/> Health/Medical | <input type="checkbox"/> Government/State/Local |
| <input type="checkbox"/> Agribusiness | <input type="checkbox"/> Travel/Hospitality |
| <input type="checkbox"/> Chemical/Agrichemical | <input type="checkbox"/> General Industry |
| <input type="checkbox"/> Education | <input type="checkbox"/> Textile |
| <input type="checkbox"/> Legal/Professional | <input type="checkbox"/> Transportation |
| | <input type="checkbox"/> Other |

2. Number of employees in your organization:

- | | |
|----------------------------------|------------------------------------|
| <input type="checkbox"/> 1-50 | <input type="checkbox"/> 501-1000 |
| <input type="checkbox"/> 51-100 | <input type="checkbox"/> 1001-5000 |
| <input type="checkbox"/> 101-500 | <input type="checkbox"/> 5000+ |

3. What factors did you consider when purchasing this product? (Select up to three)

- | | |
|---|---|
| <input type="checkbox"/> Existing Sensaphone User | <input type="checkbox"/> Corporate Standard |
| <input type="checkbox"/> Company Reputation | <input type="checkbox"/> Ease of Use |
| <input type="checkbox"/> Recommended by colleague | <input type="checkbox"/> IMS Web Site |
| <input type="checkbox"/> Recommended by VAR/SP | <input type="checkbox"/> Product Review |
| <input type="checkbox"/> Price | <input type="checkbox"/> Other |
| <input type="checkbox"/> Features | |

4. Which features do you plan on using with your IMS-1000? (Select all that apply)

- | | |
|--|--|
| <input type="checkbox"/> Real Voice Alarms | <input type="checkbox"/> External Sensors |
| <input type="checkbox"/> Pager Messages | <input type="checkbox"/> Remote Access (RAS) |
| <input type="checkbox"/> E-Mail and Two-Way E-Mail | <input type="checkbox"/> IMS-1000 Nodes |
| <input type="checkbox"/> SNMP Messages | <input type="checkbox"/> PowerGate |
| <input type="checkbox"/> TCP/IP Monitoring | <input type="checkbox"/> Data Logging |
| <input type="checkbox"/> Web Server Status Pages | |

5. How did you learn about the Sensaphone IMS-1000?

(Select only one)

- | | |
|---|------------------------------------|
| <input type="checkbox"/> Trade Show | <input type="checkbox"/> VAR/SP |
| <input type="checkbox"/> Internet | <input type="checkbox"/> Magazine |
| <input type="checkbox"/> Card Deck | <input type="checkbox"/> Colleague |
| <input type="checkbox"/> Catalog | <input type="checkbox"/> Reseller |
| <input type="checkbox"/> Previous Sensaphone User | <input type="checkbox"/> Other |

6. Do you currently use or have you reviewed a similar monitoring system?

7. How can we improve our products or services?

8. Is there someone you know who would also benefit from our Sensaphone products?

Name

Address

City, State, Zip, Phone