

REGISTRATION PAGE

Contract No.
WVP

CONTRACT HOLDERS INFORMATION

NAME
ADDRESS
CITY / STATE / ZIP

SELLER INFORMATION

NAME
ADDRESS
CITY / STATE / ZIP

CONTRACT INFORMATION

CONTRACT PURCHASE DATE*	CURRENT ODOMETER READING*
CONTRACT COST	SALES TAX (WHERE APPLICABLE) TOTAL COST

VEHICLE INFORMATION

YEAR	MAKE	MODEL
VIN		

COVERAGE PLAN

Check Applicable Box: SUPREME SUPREME WRAP DELUXE SELECT BASIC

NEW VEHICLE TERM

MONTHS	MILES
--------	-------

PRE-OWNED VEHICLE TERM

MONTHS	MILES
--------	-------

* New Vehicle and Wrap Plan expiration is measured in time/mileage from the Contract Purchase Date and (0) miles.
*Used Vehicle Plan expiration is measured from the Contract Purchase Date and Odometer Mileage at Contract Purchase Date.

NEW VEHICLE DEDUCTIBLE
(If no box is checked, \$100 deductible applies.)

STANDARD DEDUCTIBLE \$100	OPTIONAL DEDUCTIBLE <input type="checkbox"/> \$0 <input type="checkbox"/> \$25 <input type="checkbox"/> \$50 <input type="checkbox"/> Other _____
---------------------------	---

PRE-OWNED VEHICLE DEDUCTIBLE
(If no box is checked, \$100 deductible applies.)

STANDARD DEDUCTIBLE \$100	OPTIONAL DEDUCTIBLE <input type="checkbox"/> \$50 <input type="checkbox"/> Other _____
---------------------------	--

MANDATORY SURCHARGES: Coverage must be purchased and surcharges paid at the time of purchase if vehicle is equipped with the following:

<input type="checkbox"/> Diesel / Turbo or Supercharged / 4WD / AWD	<input type="checkbox"/> Lift Kit / Tire Modifications (Coverage not eligible for Pre-Owned)	OPTIONAL SURCHARGES:
		<input type="checkbox"/> Commercial Use <input type="checkbox"/> Seals and Gaskets (Basic Plan Only)

LEINHOLDER

NAME and ADDRESS

ACKNOWLEDGEMENT

I agree to purchase this Vehicle Service Contract (Contract) covering the vehicle described on this Registration Page, which must meet **Our** underwriting guidelines and is subject to acceptance by the Administrator. I agree that the time and mileage limits indicated on this Registration Page begin to run from the **Contract Purchase Date**, even though any components or parts covered by a manufacturer, supplier, or other warranty are **NOT** covered by my Contract until expiration of the manufacturer, supplier, or other warranty. **I understand that my Contract term includes any periods of applicable manufacturers' warranties.**

I understand that my Contract has been issued in accordance with the information contained on this Registration Page and is subject to the terms and conditions stated in the Contract, which I have read and received with this Registration Page.

I understand that prior authorization by the Administrator is required on repairs covered by this Contract. (Call 800-331-3780 for claims authorization.) I further understand that any Breakdown, loss, or damage that results from a pre-existing condition is not covered by this Contract.

I understand the purchase of this Contract is not required to purchase or obtain financing of my vehicle.

SIGNATURE OF CONTRACT HOLDER(S)	DATE SIGNED	SIGNATURE OF SALES PERSON
---------------------------------	-------------	---------------------------

Administrator/Obligor:
Old Republic Insured Automotive Services, Inc. (CA LIC 0C79822)
In GA, NY, WY: ORIAS Warranty Services
In TX, OR: ORIAS Warranty Services, Inc.
In FL, LA, OK, NM, WI: Minnehoma Automobile Association, Inc. (FL LIC 60033).
P. O. Box 35008, Tulsa, OK 74153-0008
1-800-331-3780