

Dear Sir / Madam,

Thank you for choosing the MELAG software MELAview and MELAtrace. Before you can start, we require the information outlined below. We will dispatch your license code as soon as we have received this completed registration form. This code is required to install your software.

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| MELAG Medizintechnik GmbH & Co. KG Geneststraße 6-10 D - 10829 Berlin GERMANY | Fax: +49 (0)30 – 75 79 11 99 E-Mail: melatrace@melag.de |
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Please complete the form below (legibly) and return it by fax or e-mail. You will need to register the software to be able to use the full functional range of the software. Please inform us of the serial numbers of all the MELAG devices which you would like to use with MELAview and MELAtrace.

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| MELAtrace (Pro) SN: always required | MELAtrace Upgrade SN: is always required if an upgrade to the Pro version is to be performed. |
| Practice: | Practice stamp (optional) |
| Street / house number | |
| Post code / town: | |
| Telephone: | |
| Fax: | |
| email: | |
| Please note the serial numbers ↓ | The following fields are for the licence codes (to be completed by MELAG) ↓ |
| Serial number of the MELAG device: (e.g. washer-disinfector) | |
| Serial number of the MELAG device: (e.g. sealing device) | |
| Serial number of the MELAG device: (e.g. steam sterilizer) | |
| Serial number of the MELAG device: (e.g. second device) | |
| Serial number of the MELAG device: (e.g. third device) | |
| Stockist / depot: (from which the MELAview / MELAtrace was delivered) | |

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|-----------|-------|------------|-------------------|
| Location: | Date: | Signature: | Name in capitals: |
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