



WWW.VCSCOMPUTERS.COM
 1-540-951-5150 (voice) 1-540-951-5156 (fax)
 sales@vcsccomputers.com (email)

OUR SALES PARTNER SINCE 1992!

TECH BOOKSTORE
 118 S. Main Street
 Blacksburg, VA 24060

CLICK HERE FOR A PRINTER-FRIENDLY VERSION OF THIS FORM!

Remember, Virus Insurance is ONLY for Windows and VISTA computers.

No matter who you purchased your Windows/Vista based computer from, you are likely NOT protected from crippling virus and spam attacks. We mean the kind of attack that renders your computer unusable - when you can't boot to windows. Or when 10,000 popups prevent you from using the computer. Or when the virus/spam has literally taken over your computer, and prevents anti-virus or anti-spyware from even running. The only solution? Scratch and Reload. Backup all the data, erase the hard drive completely, reload the operating system, reload the software, copy the saved data back to the drive. This process can take from 3-5 hours (costing \$225-375, OR MORE for just one instance - and such attacks can reoccur!

VCS Virus Insurance protects you for the entire school year for less than the cost of one occurrence. Up to 6 complete scratch/reloads!

Once purchased, your student simply brings the infected computer to the TECH BOOKSTORE (118 S. Main Street, Blacksburg), shows his or her activated Virus Insurance card, and the service is completed in 1 or 2 days.

The customer MUST show his Virus Insurance ID Card, and must inform the VCS he wishes a scratch/reload done BEFORE SERVICE IS PERFORMED.

If you're ordering Virus Insurance only, simply use the form below. If you're purchasing Virus Insurance WITH a new VCS Computer System, simply circle option "V" on that computer's order form!

RETURN THE FORM BELOW TO:

VCS/TECH BOOKSTORE, 118 S. MAIN STREET, BLACKSBURG, VA 24060 OR FAX TO 540-951-5156, OR CALL TO ORDER AT 540-951-5150

MAKE CHECKS PAYABLE TO: VCS COMPUTER SERVICE

YES - I wish to purchase VCS Virus Insurance for now thru the end of the 2009-2010 School Year (05/18/10)!

Student: _____

Address: _____

City: _____ State: _____ Zip _____

Phone: _____ Cell: _____

\$150.00

Operating System
 XP VISTA

Method of payment (Circle one please): Visa M/C Amex Discover Check Cash Order Date: _____

Card #: _____ Name on Card: _____

Card Address: _____

Expiration Date: _____ Authorized Signature: _____

VIRUS INSURANCE ORDER FORM