



## TRIAL LICENSE APPLICATION

Please fax completed form to (925)826-5745 or email to [info@truegrid.com](mailto:info@truegrid.com).

### COMPANY INFORMATION

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

### USER INFORMATION

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Email: \_\_\_\_\_

### GENERAL INFORMATION

Computer and Operating system to be used during the trial: \_\_\_\_\_

How did you learn about TrueGrid®? \_\_\_\_\_