## ShoWorks Urgent Care On-Call Support



Urgent Care On-Call support is designed for fairs who would like a guarantee of immediate/live assistance 24 hours per day, 7 days per week as well as walk-throughs (for a specific issue, but not "training" i.e. general overviews). This option is available for purchase on a per-week basis. The cost of this service is \$800 per week and includes 3 calls. The contract period begins at 12:01am (CST) on the designated date and ends at midnight the following week (168 hours later) and is not renewed automatically. Contracts must be requested at least two weeks before their period begins. Should Gladstone not return a customer call within 1 hour of the time the call is placed during the contract period, the customer will be given a choice to either cancel the contract for a full refund, or continue in the contract. Notice of the cancellation must be made through E-mail (from an address that is on file with Gladstone under the fair's name) within 12 hours of the placed customer call in consideration. Refunds will be processed within 30 days of the request, made payable to the party in which the original payment was received for the contract. If no calls are made during this contract period, half of the retainer cost \$800 will be refunded (\$400 will be refunded) making the total cost of the service \$400 if no calls are made.

This contract includes 3 urgent care calls. Calls after the first three will be billed at \$75/call. A call will not be considered successful until you speak with a technician or the technician returns the call placed.

## **Call Instructions**

Fair Name

**Urgent Care Plan Number: [provided upon receipt of signed contract]** 

Call Instructions: Call (888) 332-2419 and then...

- **Maintenance Support (non-urgent)** during regular business hours (included with Service Plan), press option 2, then enter your Service Plan Number.
- **Urgent Care Support 24/day** press option 3, then enter your Urgent Care Plan Number listed above. Your call will then be transferred to an agent's personal phone. This process may take up to 2 minutes. If there is no answer, please leave a message <u>including the phone number that you may be reached at</u>. Your call, if not answered immediately, will be returned within 1 hour per the contract.

Tail Name.		
Contract Period (1 week):	Beginning on the day	_ 12:01am CST and
Authorized Phone Numbers of Support Plan: YOU MUST PROVIDE THE FULL PHONE NUMBERS OF ALL AUTHORIZED USERS. WE WILL ONLY ACCEPT CALLS FROM THE ONES YOU LIST HERE.	Only phone numbers listed here will be answered (write number. Do not write "any"):	the full 10-digit
Authorized Users of Support Plan: write "any" if any person using your fair name is allowed		
Authorized E-mails of Support Plan: write "any" if any email is allowed		
* IMPORTANT		•••••
Please 1) submit this completed and signed co weeks prior to the beginning of the Contract P	ntact then 2) email to office@fairsoftware.com with the eriod. We will then complete the contract and applies back to you. This service will not commence up the Urgent Care Plan Number.	ly an
Name:	Title:	
Signature:	Date:	