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SOFTWARE LICENSE TERMINATION AGREEMENT

I hereby certify that my Institution will cease to use the following software package:

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Product:

Effective from: 1 October (please enter year)

I understand that my EUROPRACTICE member Institution will not receive any further software update, keys, documentation or technical support for this software package.

I also understand that should my EUROPRACTICE member Institution wish to use this software package in the future, the software will need to be re-purchased.

* Signed by, and on behalf of, the EUROPRACTICE member Institution:

(Printed:)

EUROPRACTICE Membership No:

Address:

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Tel:

Fax:

E-Mail:

Date:

*** This form should be signed by the official EUROPRACTICE Representative for the member Institution**