



FullHDClub.com Order Form

REGISTRATION STEPS

1. Select 32 Blu-Ray discs and complete the order form.
2. Send cheque for RM4,788 made payable to :
Arori (M) Sdn Bhd or bank into our CIMB (A/C: 121 600 121 620 56) and fax us the bank in slip.
3. Fax this order form to : 03 7877 4480
Mail back to : 65 Jalan SS1/11,
47300 Petaling Jaya,
Selangor.
4. If all is in order, delivery of the 32 discs and the Samsung player to your address will be within 4 weeks.

Pay RM4,788 for 32 Blu-Ray Discs and get this Samsung Blu-Ray player for FREE (worth RM3,999)!



- | | | |
|---|---|---|
| <input type="checkbox"/> 30 Days of Night | <input type="checkbox"/> Good Luck Chuck: Unrated | <input type="checkbox"/> Stealth |
| <input type="checkbox"/> 50 First Dates | <input type="checkbox"/> Gridiron Gang | <input type="checkbox"/> Stomp The Yard |
| <input type="checkbox"/> A Few Good Men | <input type="checkbox"/> Hellboy | <input type="checkbox"/> Stranger Than Fiction |
| <input type="checkbox"/> A Knight's Tale | <input type="checkbox"/> Hitch | <input type="checkbox"/> Superbad: Extended Special Edition (2 Discs) |
| <input type="checkbox"/> Across The Universe | <input type="checkbox"/> Hollow Man: Directors Cut | <input type="checkbox"/> Surf's Up |
| <input type="checkbox"/> All The King's Men | <input type="checkbox"/> Hostel Part One: Directors Cut | <input type="checkbox"/> S.W.A.T |
| <input type="checkbox"/> Are We Done Yet? | <input type="checkbox"/> Hostel Part Two: Directors Cut | <input type="checkbox"/> Talladega Nights: The Ballad of Ricky Bobby |
| <input type="checkbox"/> Big Fish | <input type="checkbox"/> Identity | <input type="checkbox"/> Tears of The Sun |
| <input type="checkbox"/> Black Hawk Down | <input type="checkbox"/> Into The Blue | <input type="checkbox"/> The 6th Day |
| <input type="checkbox"/> Casino Royale | <input type="checkbox"/> Kung Fu Hustle | <input type="checkbox"/> The Benchwarmers |
| <input type="checkbox"/> Catch and Release | <input type="checkbox"/> Layer Cake | <input type="checkbox"/> The Covenant |
| <input type="checkbox"/> Click | <input type="checkbox"/> Little Man | <input type="checkbox"/> The Fifth Element |
| <input type="checkbox"/> Close Encounters of The Third Kind | <input type="checkbox"/> Memoirs of a Geisha | <input type="checkbox"/> The Legend of Zorro |
| <input type="checkbox"/> Closer | <input type="checkbox"/> Monster House | <input type="checkbox"/> The Patriot: Extended Cut |
| <input type="checkbox"/> Codename: xXx | <input type="checkbox"/> Open Season | <input type="checkbox"/> The Pursuit of Happiness |
| <input type="checkbox"/> Cruel Intentions | <input type="checkbox"/> Paprika | <input type="checkbox"/> The Tailor of Panama |
| <input type="checkbox"/> Daddy Day Camp | <input type="checkbox"/> Perfect Stranger | <input type="checkbox"/> The Waterhorse: Legend of The Deep |
| <input type="checkbox"/> Erin Brockovich | <input type="checkbox"/> Reign Over Me | <input type="checkbox"/> Ultraviolet |
| <input type="checkbox"/> Damages: Season One | <input type="checkbox"/> Rent | <input type="checkbox"/> Underworld Evolution |
| <input type="checkbox"/> Dragon Wars | <input type="checkbox"/> Running With Scissors | <input type="checkbox"/> Vacancy |
| <input type="checkbox"/> Final Fantasy: The Spirits Within | <input type="checkbox"/> RV | <input type="checkbox"/> Vertical Limit |
| <input type="checkbox"/> Flatliners | <input type="checkbox"/> Secret Window | <input type="checkbox"/> Warriors of Heaven and Earth (C) |
| <input type="checkbox"/> Gattaca | <input type="checkbox"/> Spiderman 3 | <input type="checkbox"/> Wild Things: Unrated Edition |
| <input type="checkbox"/> Ghost Rider: Extended Cut | <input type="checkbox"/> Spiderman Trilogy (3 Discs) | |

CUSTOMER DETAILS

Name (per IC) : _____
 NRIC No : _____
 Delivery Address : _____

 State : _____ Post Code : _____
 Mobile Number : _____
 Home Telephone Number : _____
 Email Address : _____

PAYMENT DETAILS

I will be paying via :

Cheque

Direct Bank-in * - CIMB (A/C: 121 600 121 620 56)
* Bank-in slip must be faxed to : 03 7877 4480

Other. Please specify : _____

If cheque, please state cheque number : _____

 Your Signature

 Date