THE ROCKLAND COUNTRY DAY SCHOOL

Partnered with

HUDSON ENERGY SERVICES

Residential

Name: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone: _____

E-mail: _____

Promotion Code: **RCDS**

Public Utility/Energy Provider _____

Public Utility Account Number _____

Energy Provided (please check one): **Gas and Electric** _____

Gas _____

Electric _____

Check here for Fixed Rate Option _____ **1 Yr.** _____**3 Yr.**

I authorize Hudson Energy Services LLC to enroll the above listed account(s) with my utility so that Hudson Energy Services, LLC becomes my energy supplier. This agreement is subject to Hudson Energy Services LLC's terms and conditions.

Signature_____ **Date**_____

4 Executive Blvd.
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Suffern, NY 10901

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