

NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

## **BUSINESS REPLY MAIL**

FIRST CLASS MAIL PERMIT NO. 196 REDWOOD CITY, CA

POSTAGE WILL BE PAID BY ADDRESSEE

SEGA CD™ REGISTRATION P.O. BOX 5784 REDWOOD CITY, CA 94063-9771



## TO REGISTER:

COMPLETE THESE
QUESTIONS AND
MAIL THIS POSTAGEPAID CARD TO SEGA.

THANK YOU.

1. Who will use	this SEGA produ	ct the mos	t (primary user)?
First name		Last name	
_ _ _ _ _ _ _ Address	_ _ _ _ _		
The state of the s			
[_ _ _ _ _ _ Gity	_!_!_!_!_!_!_		
_ _     State Zin		_ _ _   _ _  Phone number	
			7
_1 male	remaie	Birth Date/_ mo / da	
	other game pla		home:
PLAYER 1: Age		☐ z Female	
PLAYER 2: Age	_ 🗆 3 Male	4 Female	
3. Who bought	this product?		
	2 Parent/Guardian	□ 3 Friend	
	5 Another Household A	fember	
When was it bo			
Wilell Was It bu	mo / vr		
		_	
4. What is the	name of the gam	e you purch	iased?
	electronics or co		
	LEASE CHECK EV		OU HAVE.
For Game Play		Other:	
V.D. 1917 (1918) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	2 Game Boy		
			4 PC (IBM or IBM Compatible
	6 Super NES (16 bit)		
□ 7 TurboGrafx CD	☐ s Other	☐ 5 VCR	
6. What kinds	of games do you	play most o	ften?
☐ 1 Fantasy Action	2 Fantasy Role Playing		
4 Fighting Adventure	☐ 5 Futuristic	☐ 6 Super Heroes & Cartoons	
□ 7 Puzzles/Strategy	□ a Sports	EEE AT	