SIGNED by a duly authorised officer / representative for and on behalf of:

VIDEO ARTS LIMITED

Working Links

Signature:

Print name:

Print name:

Position:

LMS Co-ordination Manager

Date: 6/6/2017

These Agreement Particulars together with the attached schedule(s) and relevant Terms and Conditions, form the agreement between the Parties ("the **Agreement**"). SIGNED by or on behalf of the Parties on the date which first appears in this Agreement.