

# Start Managing Your Energy Costs Today!



Electric Advisors, Inc.

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Name \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

• I \_\_\_\_\_ hereby give Electric Advisors permission and  
(Customer Name-please print)  
**authorization to enroll my:**

Natural Gas Account # \_\_\_\_\_

for WGES natural gas supply service for  1 year  2 years

at \$ \_\_\_\_\_ per therm

Electricity Account # \_\_\_\_\_

for WGES electricity supply service for  1 year  2 years  3 years

at \$ \_\_\_\_\_ per kw hour

I understand Electric Advisors will enroll my account(s) selected above through a web site enrollment process and that I will receive written confirmation about by enrollment(s) from Washington Gas Energy Services.

Customer Signature \_\_\_\_\_

Date \_\_\_\_\_

Term of service (1 year, 2 year etc.) must be checked  
and form signed and dated in order for you to  
**GET STARTED TODAY!**