

# Subscriber Agreement Form



## Client

Registered Name:			
Trading Name:			
Industry or Main Business:		Physical Address: (domicilium citandi et executandi)	
VAT Number:			
Postal Address: (domicilium citandi et executandi)		Email Address: domicilium citandi et executandi)	

## Contact Details (Person responsible for the account)

Title		ID number	
Surname		Name	
Telephone Number		Mobile Number	
Facsimile Number		Email Address	

## Finance Department Details

Title		Position Held			
Surname		Name			
Telephone Number		Mobile Number			
Facsimile Number		Email Address			
Authority to Debit	YES	NO	Invoice Required	YES	NO

## Bank Debit Order Authorisation

Type of Account			
Name of Account Holder			
Name of Bank		Account Number	
Branch Name		Branch Code	

## Authorised Signatory for Client

Full Name		Full Name	
Designation		Designation	
Signature The duly authorised signatory has read, understands and accepts these terms and conditions		Signature The duly authorised signatory has read, understands and accepts these terms and conditions	

## Authorised Signatory for the Service Provider