

APPLICATION FORM

Date _____

Company Name _____

Registration Number _____

Broker Travel Agent Other (specify: _____)

Postal address _____

Physical Address _____

Tel (Code + Number) _____ Docex Number _____

Fax (Code + Number) _____

ACCOUNTS CONTACT DETAIL

Name _____

Tel (Code + Number) _____

Fax (Code + Number) _____

E-mail Address _____

BANKING DETAIL

Bank _____ Branch Code _____

Account Type _____ Account Number _____

SIGNED FOR ON BEHALF OF ABOVEMENTIONED BUSINESS

Name (Please Print)

<u>TIC Office Use Only</u>	
Account Number _____	Allocate to Group _____
Allocate to rep _____	E-mail: _____
Sales Manager _____	Captured by _____

