



# Dial-Up Application

PO Box 27193, Rhine Rd, Cape Town, 8050  
Tel: +2721-4217912  
Fax: +2721-4219215

## SUBSCRIBER DETAILS

Name: \_\_\_\_\_  
Title: \_\_\_\_\_  
Registered Name: \_\_\_\_\_  
Trading Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_ Code: \_\_\_\_\_  
Postal Address: \_\_\_\_\_ Code: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Cell: \_\_\_\_\_  
Fax Number: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_  
Co. Registration / I.D. Number: \_\_\_\_\_

Tick where applicable:

Service:  Analogue Dial-Up (R95pm – Incl VAT)  ISDN Dial-Up (R95pm – Incl VAT)  
 Dual-Channel ISDN Dial-Up (R190pm – Incl VAT)  Other \_\_\_\_\_

Set up: .....
Vat: .....
Total <b>R0.00</b>

Monthly: .....
Vat: .....
Total: <b>R</b> .....

**NB: One month's written notice period applies.**

Email Address Required? Yes  No  If Yes: \_\_\_\_\_@y.co.za

## AUTHORISATION FOR PAYMENTS

I hereby authorise Blue Sky Internet Online cc to draw monthly against my bank account the subscriptions of R \_\_\_\_\_ ( ) payable monthly in advance on the first business day of each month. This authorisation can be cancelled by me by giving 30 days written notice.

Bank debit order  Cheque payment  Credit Card payment

<b>Our Bank Details:</b>
Bank: Standard Bank
Branch: Sea Point
Branch Code: 024109
A/C #: 071072942
Name: Internet Online

\_\_\_\_\_  
SIGNED (Duly authorised)

\_\_\_\_\_  
DATE

For DIRECT DEBT PAYMENT: (Name Of Account)	
Bank & Branch	_____
Bank Clearing No.	_____
Account Type	_____
Account No	_____

For CREDIT CARD PAYMENT			
CC Number:		_____	
Expiry Date: _____			
CVC:	_____	Type:	_____
Name on Card: _____			

**FOR OFFICE USE ONLY**  
Accepted for Internet Online.

Username: \_\_\_\_\_  
Password: \_\_\_\_\_

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Cust Code: \_\_\_\_\_

### PLEASE NOTE THE FOLLOWING

Check that all information is correct and clearly legible, as Internet Online cannot be held responsible for incorrect information.