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Agreement Between MegaVoIP T/A Megasurf Wireless Internet cc and Applicant.		Number:		
			For Offic	ce use or Existing client code
	Ported Number: For Off	ice use or Existing client code	Domain:	For Office use or Existing client code
Name and Surname:				
ID No:				
Email:				
Tel No:		Mobile No:		
Postal Address:				
		Postal Code		
Physical Address:				
		Postal Code		
If Company Name:				
Company Reg. No:		Company VA	AT No:	
Service:				
Description:				
Monthly Service Fee:	R			

** No application will be processed without a Copy of your ID or if this form is uncompleted.

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Confirmation:

Extensions:

Porting Fee:

 \square I hereby confirm that I authorise to enter into this agreement and that the information provided is true

and correct.

□ I acknowledge that I have read, and do hereby accept the terms and conditions obtained Online (<u>http://www.megasurf.co.za/terms/</u>) or a hard/electronic copy obtained from the Megasurf office.

The Subscriber, Full Name:			
Signed at	on the	of	20
Signature:			
The Megasurf Rep, Full Name:			
Signed at	on the	of	20
Signature:			