



Vox Application Form

Dealer/Sponsor number
(the person who introduced you.)

507541

Apply Vox Power Strategy: Yes

No

If yes, dealer number of last member in downline:

Register Register as: Customer

Dealer

Type: Individual

Company

Date

Contact Details

Initials

Title: Mr

Mrs

Miss

Dr

First Name

Last Name

Tel (H)

Tel (W)

Cell

Fax

ID/Passport Number

Email

Company Details (Only applicable if registering as a business entity)

Company Name

Trading as

Reg No

CC

Pty (Ltd)

Sole proprietor

Trust

Vat Registered: Yes

No

Vat Number

Address Details

Physical

Province

City

Suburb

Code

Postal

Province

City

Suburb

Code

Delivery

Province

City

Suburb

Code

Banking Details

Account type: Savings

Cheque

Transmission

Credit Card

Bank

Branch

Branch Code

Account Holder

Account Number

Income Tax Number
(If registering as a dealer)

How would you like to pay?

Debit Order

Credit Card

Type: Visa

Mastercard

Credit Card Number

CVV Number

(Last 3 digits on back of card)

Expiry Date
(MM/YY)

I hereby grant Vox Telecom (Pty) Ltd authority to debit my/our account with amounts payable by me/us.

Vox ADSL Phone Details (Only applicable if purchasing a Vox ADSL Phone)

Serial Number

MAC Address

Terms and Conditions

I hereby acknowledge that I have read and understood all of the conduct rules and policies as outlined in the terms and conditions on the Vox website (www.vox.co.za) and agree and accept that they form part of this agreement.

Signed at

Date

Applicant's Signature

Someone's listening to you

Please fax to 086 600 1025