CARD PRINT REQUEST

V 1 - 050213

PEGASUS SAFETY PTY LTD

COMMERCIALLY IN CONFIDENCE

426 King Street Newcastle NSW 2300

Phone: 1300 441 433

Email: cardrequests@pegasus.net.au

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| **COMPANY DETAILS** |
| Company Name |  |
| Contact Name |  | Phone |  |
| Date Requested |  |

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| **CARDHOLDER DETAILS** |
| Surname: |  | Given Names: |  |
| Card ID #: |  | Date of Birth: |  |
| Street Address: |  |
| Town / Suburb: |  |
| State: |  | Postcode: |  |
| Postal address (to send card): |  |

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| **PAYMENT OPTIONS** | **DETAILS** |
| Payment Total | $ 33.00 | Incl GST Amount | $ 3.00 |
| Purchase Order No |  |  |
| Credit Card | Bankcard |  |  - - - / - - - / - - - / - - - Expiry: - / - CVV # (last 3 digits on back of card) |
| MasterCard |  |
| VISA |  |
| Direct Deposit/EFT |  | Account Name: Pegasus Safety Pty LtdBSB No: 082845 – Account No: 750 262 720 |

Please complete this form and email it to cardrequests@pegasus.net.au Once processed, the Pegasus branded card will be posted to the address listed above.

To accept these conditions, sign here:

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| **OFFICE USE ONLY** |
| Card printed by (initials): |  | Invoice No: |  |
| Posted (Date): |  | Payment Processed (if EFT): |  |