

AFFILIATE MERCHANT APPLICATION FORM

[Please confirm before proceeding]

New Merchant Application	Country of Business
YES / NO	

Please complete ALL sections accurately to ensure your Application is processed without delay.

Your data will be held electronically within our operational database. Disclosure of your personal data may be made under the terms of our Privacy Agreement to prevent or detect fraud, or to assist in verifying your identity and credit rating. We may pass your details to third party agencies for background check.

1. Merchant Details			
Legal Name (the Merchant) Trading Name (if different) Trading Address Correspondence Address (if different from above) Telephone Number (land line) Telephone Number (mobile) Facsimile Number Company Registration Number Web Address Your main area of business			
		Postcode	
		Postcode	
	http://		
Contact Name 1 Email Address Contact Name 2 Email Address	Mr/Mrs/Ms		Position
	Mr/Mrs/Ms		Position

2. Products / Services for Listing	
Product / Service Name	Description
1)	
2)	
3)	
4)	

3. Submitted for and on behalf of the Merchant	
Name – please print	
Position	
Date	