



access to the biggest deal in africa

Card Holder:

Title: Initials: First Name:

Surname:

ID No: Birth Date:

Require a card for your spouse? Yes No

Mailing Address:

Suburb:

City: Code:

Cellphone Number:

Telephone (w): Code: No:

Fax: Code: No:

E-mail Address:

If you require a valid **VAT invoice** please complete this section:

VAT Registration No:

Name of Business:

Street Address

of Business:

Suburb:

City: Code:

If you **do not** wish to receive promotional material please indicate in the relevant box:

Post: Do not send Email: Do not send SMS: Do not send 3rd Party Marketing: Do not send



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