



**Konnectv Pty Ltd** ABN 11 124 704 990

Unit 1B  
137-139 Silverwater Road  
Silverwater NSW 2128  
Australia

Tel: **61290984378**

Email: [info@Konnectv.com](mailto:info@Konnectv.com)  
[www.Konnectv.com.au](http://www.Konnectv.com.au)

**SUBSCRIBER INFORMATION:**

Title: \_\_\_\_\_ First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

Suburb: \_\_\_\_\_ State: \_\_\_\_\_ Post Code: \_\_\_\_\_

**CONTACT INFORMATION:**

Tel (Home): \_\_\_\_\_ Tel (Work): \_\_\_\_\_

Mobile: \_\_\_\_\_

Email: \_\_\_\_\_

**PAYMENT DETAILS:**

CREDIT CARD DETAILS     MONTHLY SUBSCRIPTION AND OTHER PAYMENT     INITIAL PAYMENT

Card Type:     Visa     MasterCard

Credit Card Number: \_\_\_\_\_ Expiry Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Cardholder Name: \_\_\_\_\_

Cardholder Signature: \_\_\_\_\_

BANK ACCOUNT DETAILS     MONTHLY SUBSCRIPTION AND OTHER PAYMENT     INITIAL PAYMENT

BSB: \_\_\_\_\_ Account No.: \_\_\_\_\_

Financial Institution: \_\_\_\_\_

Branch Name: \_\_\_\_\_

Account Holder Name: \_\_\_\_\_

Account Holder Signature: \_\_\_\_\_

**AUTHORITY:**

I give authority to Konnectv to Debit my nominated Credit Card/Bank Account for my Monthly subscription and/or Initial charges as specified. The amount debited is as per the agreement signed with Konnectv.

If the monthly subscription is altered after notification by Konnectv, the revised amount will be charged.

I agree to the terms and conditions provided by Konnectv.

Signature: \_\_\_\_\_

Name: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_