

TRADE DETAILS FORM

BUSINESS NAME: _____

CONTACT NAME: _____

ADDRESS: _____

TELEPHONE: _____

FACSIMILE: _____

EMAIL ADDRESS: _____

PLEASE INDICATE WHICH OF THE FOLLOWING APPLIES:

REGISTERED FOR GST : YES NO

PLEASE SUPPLY YOUR ABN BELOW:

PLEASE SUPPLY BANK DETAILS FOR DIRECT DEBIT PAYMENTS:

ACCOUNT NAME: _____

BANK: _____

BSB: -

ACCOUNT NUMBER: _____

PAYMENT: EFT ONLY

PRINT NAME: _____ SIGN: _____ DATE: ___/___/___