



16 Mopanie Street

Kathu

8446

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VAT: 4650 281 381

Reg no: 2016/050164/07

Wireless Internet Application Form for Individuals

Service applied for:

For office use: Approved Declined

New WiFi installation: OR Take-over:

Current Service Provider (if take-over): _____

1. Client Particulars

Full name and surname:	
ID number (attach copy of ID)	

2. Contact Details

Email address:	
Phone number:	
Mobile number	
Postal address:	
Physical address:	

3. WiFi Package:

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4. Do you want to sign a debit order for the monthly subscription?

<input type="checkbox"/> Yes See Terms and Conditions below regarding debit orders
<input type="checkbox"/> No

Selected WiFi name (e.g. Retief_Residence): _____

WiFi Password (Min. 8 characters): _____

I acknowledge that:

I have read and understood the terms and conditions;

That all above information is true and correct according to my knowledge;

That I consent to use my personal information for the purposes for which it was collected relating to Kalahari 24/7's legitimate business operations

Client: _____ Signature: _____ Date: _____

Kalahari 24/7: _____ Signature: _____ Date: _____

For office use:

Account number: _____

Data Account: _____