



Customer Registration Form

Buks: 082 331 1022 Office: 053 861 4692
 Volp: 053 050 0002 Fax: 086 611 5463
 Mail: admin@iclixnc.co.za Website: www.iclixnc.co.za
 13 Waterberg Street, Carters Glen, Kimberley, 8301

Office use:			
Account ID: NC			
		Personal details: All fields required	
Full name & Surname:			
E-mail:			
Identity nr:		Company name:	
Telephone nr:		VAT nr:	
Cell nr:		Company reg:	
Fax nr:		Date required:	
Postal adress:			
Physical adress:			
Iclix Secure Web Login information (All fields required)			
Wireless Username:		Wireless Password:	

Capped Wireless					
Cap Limit	Price	Qty	Cap Limit	Price	Qty
500MB + 500 Free	R100.00	<input type="checkbox"/>	5GB + 2GB Free	R420.00 <input type="checkbox"/>	
1GB + 1Gb Free	R150.00	<input type="checkbox"/>	7GB + 5GB Free	R720.00 <input type="checkbox"/>	
2 GB + 1GB Free	R210.00	<input type="checkbox"/>	10GB + 5GB Free	R900.00 <input type="checkbox"/>	
3 GB + 1GB Free	R270.00	<input type="checkbox"/>	Per cab Extra	R60.00 <input type="checkbox"/>	

Uncapped Wireless Internet					
Speed	Price	Qty	Speed	Price	Qty
128k + 128k Free	R350.00	<input type="checkbox"/>	1024k	R1600.00	
256k + 128k Free	R550.00	<input type="checkbox"/>	2048k	R2130.00	
384k + 128k Free	R750.00	<input type="checkbox"/>	3072k	R3285.00	
512k + 128k Free	R950.00	<input type="checkbox"/>	4096	R4620.00	

Banking Details(All field required)					
Account Holder:					
Bank:		Branch & Town:			
Branch Number:		Account Nr:			
Account Type:		Current/Cheque	Savings	Transmission	

I.....hereby autorise Iclix Nc to debit my bank account with the monthly instalment for internet services,paid in advance, on the 1st 5th 15th 30/31st.

Signed on:.....

Signature: