



Conference Central
Teleconference solutions
Phone: 1300 971 461

Credit card payment authority form

Clearview S.A Pty Ltd Trading as Conference Central

1. Business / Company details "Customer"

Entity Type Individual / Sole Trader partnership Sole Trader Other

Company Name _____ Position _____

Trading Name _____

ABN or A.C.N |_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|

Street Address _____ State _____ Post Code |_|_|_|_|_|

Account holders name _____ Email _____

Telephone (|_|) |_|_|_|_|_|_|_|_|_|_|_|_| Mobile |0|4| |_|_|_|_|_|_|_|_|_|_|_|_|

3. Payment Authority

I/we request that the payment for services as due from Clearview S.A Pty Ltd Trading as Conference Central to debited from the card details listed below.

Credit card type VISA Master Card AMEX

Credit card no. |_|_|_|_|_|_| |_|_|_|_|_|_| |_|_|_|_|_|_| |_|_|_|_|_|_| Expiry date |_|_|_|_|_|

CVV |_|_|_|_|

Name on card (print) _____ Sign _____ Date ___ / ___ / 2021

4. Acknowledgement of this agreement

By signing this direct debit authorisation form I acknowledge that I am the authorised card hold of this account.

Please note that Clearview S.A Pty Ltd—Enfield will appear on your credit card statement. Merchant facilities are provided by eWay.

Should you wish to cancel this direct debit please email mark.martin@digitalworld.com.au or info@conferencecentral.net.au.

Full name (print) _____ Sign _____ Date ___ / ___ / 2021