Agreement/Info needed for new .co.za domain

Please complete and fax back to +27 21 886 7782

Domain Name: _____

Owner information:
Company name: _____
First name, last name: _____
Street address: _____
_____
Postal address: _____
_____
Tel no: _____
Fax no: _____
e-mail address: _____

ALL THE ABOVE FIELDS ARE REQUIRED

Admin details: Tick if same as owner: ☐
First name, last name: _____
Street address: _____
_____
Postal address: _____
_____
Tel no: _____
Fax no: _____
e-mail address: _____

Billing contact: Tick if same as owner: ☐ admin: ☐
First name, last name: _____
Street address: _____
_____
Postal address: _____
_____
Tel no: _____
Fax no: _____
e-mail address: _____

By signing this form, you agree to be bound by the .com/ .net/ .org domain registration agreement available at
http:/www.pcservices.co.za/domain/agreecomnetorg.html

_____ _____ ___/___/_____
Signed Name (Print) Date