

Registration Form



Serial Number

Mr Mrs Ms

* Surname:

* Other Name(s):

* Address

Village / Town

* ID No / Passport No:

Nationality:

* Date of Birth

Contact Number

Email:

Date of Purchase

* Mandatory fields

Number(s) to be registered:	Emtel Cash (Tick)	Emtel Cash (Tick)
1 _____	<input type="checkbox"/>	5 _____ <input type="checkbox"/>
2 _____	<input type="checkbox"/>	6 _____ <input type="checkbox"/>
3 _____	<input type="checkbox"/>	7 _____ <input type="checkbox"/>
4 _____	<input type="checkbox"/>	8 _____ <input type="checkbox"/>

Mobile

Airbox

I hereby certify that the information provided above is true and confirm having read and understood the Terms and Conditions of this service, which is available at www.emtel.com and agree to be bound by the said Terms and Conditions.

Client Signature _____

Date _____

Important notice

- Guardian should fill in the form on behalf of minors and number shall be deemed to belong to the guardian.
- Any incorrectly filled or incomplete form shall not be accepted and Emtel shall not be liable for any error or omission made while this form is being filled.

For Office use

I, dealer/showroom staff, hereby certify that I have checked, understood and agreed to all the information above and found them to be accurate and complete.

Dealer Code

Showroom Location

Name _____

Authorised Signature _____

Date _____