



# Registration Form

Serial Number

Mr

Mrs

Ms

**Type of Application:**

Individual

Corporate

\* Surname / Company name:

\* Other Name(s) / Employee name:

\* Address:

Village / Town:

\* ID No / Passport No/ BRN:

Nationality/ VAT No:

\* Date of Birth:

Contact Number:

Email:

Date of Purchase:

\* Mandatory fields

**Number(s) to be registered:**

Emtel Cash (Tick)

Emtel Cash (Tick)

1

5

2

6

3

7

4

8

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](http://www.emtel.com) and agree to be bound by the said Terms and Conditions.

Director / 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