

keeping northern australia connected

Card Authority Form

Date:

Sea Swift Customer No.: **C**

I, ,

Printed Name

Check only one:

As the Individual cardholder, I hereby authorise this card to be used for the payment required.

As the company representative, I hereby authorise this card to be used for the payment required.

Card information:

Name as it appears on the Card:

Type of Card: VISA MASTERCARD

Please do not provide your card details on this form. A member of the Sea Swift Accounts Team will contact you directly to enter your card details securely into the Bpoint merchant system.

Card billing details:

Street:

City: State: Post Code:

Telephone: Driver's License:

Email:

I hereby authorise this card to be used for the future charges to my Sea Swift Account.

Sign to authorise charges/payments:

OFFICE USE ONLY:

Name of the person entering the card detail:

I confirm that the card details have been entered into BPOINT data vault, tokenised and card information has been destroyed.

Signature of the person entering the card details: