



## Application for WebHosting (0709)

To complete this form:

- Fill in the details we need on pages 1 and 2 – ring us on 1300 720 207 if you need help
- Read the Terms and Conditions on [www.twg.net.au](http://www.twg.net.au) and sign at the bottom of this page
- Fax or post completed pages 1 and 2 back to us

### 1. Applicant/Administrative Contact (ie owner of the domain name)

Title:	<input type="text"/>	first name:	<input type="text"/>	last name:	<input type="text"/>
Company name:	<input type="text"/>			ACN:	<input type="text"/>
Address 1:	<input type="text"/>			phone:	<input type="text"/>
Address 2:	<input type="text"/>			fax:	<input type="text"/>
Suburb or city:	<input type="text"/>	state:	<input type="text"/>	postcode:	<input type="text"/>

### 2. Billing Contact for licence renewals (if different to contact above)

Title:	<input type="text"/>	first name:	<input type="text"/>	last name:	<input type="text"/>
Company name:	<input type="text"/>			ACN:	<input type="text"/>
Address 1:	<input type="text"/>			phone:	<input type="text"/>
Address 2:	<input type="text"/>			fax:	<input type="text"/>
Suburb or city:	<input type="text"/>	state:	<input type="text"/>	postcode:	<input type="text"/>

### 3. WebHosting Services Required

Please select (✓) the hosting features you require :-

standard hosting including cgi, php, emails and aliases - <b>\$22.00</b> per month	<input type="checkbox"/>
custom hosting environment as per my attache details	<input type="checkbox"/>

### 4. Applicant Please Sign Here

The Applicant has read the Terms and Conditions for the supply of hosting services by TWG and agrees to be bound by them as they are published from time to time at <a href="http://www.twg.net.au">www.twg.net.au</a> .			
Applicant signature:	<input type="text"/>	date:	<input type="text"/>

### 5. Domain Details

Registered or required domain :   
 (eg companyname.com.au, companyname.com, companyname.net.au, etc )

Organisation name :   
 (company's name, trading name, association name, etc if applicable)

ACN:  and/or ABN:  State

Company

Suburb :  State:  Postcode:

### How will you pay us?

### 6. Payment details

(√) choose payment method:	instructions
<input type="checkbox"/> Direct deposit	Deposit to Westpac Banking Corporation Account name: The Werks Group BSB 032-020; a/c # 150547
<input type="checkbox"/> Cheque/money order	Payable to: The Werks Group Post: PO Box 879 Rozelle NSW 2039
<input type="checkbox"/> Credit card	Your card will be automatically charged for renewals
Credit card details:	
Type of card: (Master, Visa, etc)	<input type="text"/> expiry date: <input type="text"/>
	Amex ID /CCV: <input type="text"/>
Card number:	<input type="text"/>
Cardholder name:	<input type="text"/>
Cardholder signature:	<input type="text"/>