

New Customer Application

To set up an account with Wizardry we require you to supply the following information.

Please ensure all fields are completed, as omitted fields could result in your application being declined.

General Company Information						
Company Name:						
Trading Name: (If different from above)						
Directors name:						
Company Contact:						
Company Address:						
			State:	Postcode:		
ABN:						
Phone:		Fax:				
Email:		Website:				
Accounts Payable Inforn	nation					
Accounts Contact:						
Accounts Phone:						
Accounts Email:						
Purchase Orders: (Do you work off Purchase orders)	Yes No					
Business / Trade Refere	ences					
Company 1 Name:		Address:				
Phone:						
Company 2 Name:		Address:				
Phone:						
Company 3 Name:		Address:				
Phone:						
	rm vou agree to Wizardry's Terms & Con	dialogo o postal de la companya de l				



Customer Agreement

I/We acknowledge that to establish credit with Wizardry, I/we have given as much information as possible. By signing this application, I the Applicant/s & Directors/Owners of the applying company acknowledge that I/we have read Wizardry's specified terms as laid out in the terms and conditions supplied to the applicant/s with this application. Failure to comply with these terms may result in the applicant being placed on a permanent COD basis.

I/We the Applicant/s and the Directors/Owners acknowledge that the information supplied on this form is true and correct and is necessary to enable Wizardry to assess and process this application for credit. By signing this agreement, the signatory/ies confirm that he/she/they are authorised to give Wizardry authorisation to obtain, record and disclose information about the applying company, and give permission for Wizardry to record, obtain and disclose information as would be reasonably accepted and deemed necessary for the purposes of credit. This includes all information obtained, recorded or disclosed about the Applicant/s company and/or its Directors/Owners now or in the future for the purpose of credit assess- ment, credit management as well as to or from other credit providers including debt collection agencies, trade credit insurers and any other business providers.

I/We have read and understand this application and the terms and conditions provided. I/We understand that if Wizardry should agree to supply credit to the mentioned company applying for credit that we jointly, unconditionally and irrevocably, guarantee payment to Wizardry of all amounts due and owing. I/We agree to idemnify Wizardry against all losses & liabilities, costs & expenses it suffers or incurs which arise as a result of a direct or indirect breach or non observance of any of the terms and conditions mentioned in the supplied.

I/We authorise Wizardry to obtain and record necessary information as would be reasonably expected to confirm this guarantee. We acknowledge that Wizardry offers the following account types. 30 day account, 7 day account & COD. We agree to accept the account terms that Wizardry issues to us.

Name: (Block Letters)		
Signature:		
Date:		