



Single Office Subscription Form
Fax to: 086 498 5223 or e-mail: subscription@cmainfo.co.za

SUBSCRIBER DETAILS	TRADING NAME :		
	BRANCH/SUBURB:	TELEPHONE:	FAX:
	REGISTERD COMPANY NAME OR FULL NAME :		
	ID NO/COMPANY REGISTRATION NO :		
	VAT NUMBER :		
	ADDRESS Physical		
	ADRESS Postal		

PRINCIPAL	NAME:	CONSENT	
	EMAIL:		
	CONTACT NUMBER:	Allow Title Deeds	Allow Telephone Numbers
ACCOUNTS	NAME:	----- Signature of Principal	
	EMAIL:		
	CONTACT NUMBER:		

AGREEMENT : I/we hereby subscribe to the service provided by CMA Info cc and confirm that I/we have read and accept the terms and conditions particularly clause 9 as well as the disclaimer all as recorded at www.cmainfo.co.za.

Signed _____ at _____ Date ____ / ____ / ____

Duly authorised – Please print Name of Signatory _____

DEBIT ORDER DETAILS	Debit order payment – see Terms and Conditions at www.cmainfo.co.za .	
	BANK Name _____	
	Branch _____	
	Account Number _____	
	Mandate : I/We acknowledge that all payment instructions issued by you shall be treated by my/our above-mentioned Bank as if the instructions have been issued by me/us personally.	
	Cancellation : I/We agree that although this Debit Order Authority and Mandate may be cancelled by me/us, such cancellation will not cancel the Subscription/Agreement. I/We shall not be entitled to any refund of amounts which you have withdrawn while this Authority was in force, if such amounts were legally owing to you.	
	Assignment : I/We acknowledge that this Authority may be ceded or assigned to a third party if the Subscription/Agreement is also ceded or assigned to that third party, but in the absence of such assignment of the Subscription/Agreement this Authority and Mandate cannot be assigned to any third party.	
BANK STATEMENT REFERENCE : CMAINFOCC		
AGREEMENT		
Signed _____ at _____ Date ____ / ____ / ____ (Signature as used for operating on the account)		

FNB BANK REFERENCE
CMA INFO ACCOUNT NUMBER

CMAINFOCC



Client Subscription Confirmation
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COMPANY NAME :

BRANCH/SUBURB:

TELEPHONE:

FAX:

SUBSCRIPTION	NUMBER	PRICE	VAT	PRICE (Incl. VAT)
Monthly Subscription Including 1 User	1	R 570.00	R 79.80	R 649.80
Additional Agents (per agent)		R 45.00	R 6.30	R 51.30
Title Deeds		R 99.00	R 13.86	R 112.86
Telephone Numbers		R 3.60	R .50	R 4.10

SPECIAL INSTRUCTIONS:

Principal Name: _____ Signed _____ Date ____/____/____

CMA Info Consultant Name: _____ Signed _____