

Application to open an international account with

Traditional Medicine Supplies Pty Ltd

PO Box 7052 Alexandria NSW 2015 Australia

Tel: +61 2 8063 8800 Fax: +61 2 8063 8899 E-mail: admin@tradmed.com.au

Please complete in print and return by fax or email

Would you like to receive our newsletter (email)?

YES / NO (circle)

How did you hear about T.M.S?

- Friend / Word of mouth
- Advertising
- Seminar / Trade show
- Other _____

NAME: _____ DATE: _____

CLINIC OR BUSINESS NAME : _____

POSTAL ADDRESS _____ CODE _____

DELIVERY ADDRESS (IF Different) _____ CODE _____

DELIVERY INSTRUCTIONS _____

TEL: Country code ____ (____) _____ FAX: Country code: ____ (____) _____

MOBILE PH: _____ EMAIL ADDRESS: _____

QUALIFICATIONS: _____ PROVIDER NO/ STUDENT NO. _____

PRINCIPLE MODALITIES USED : _____

PAYMENT DETAILS:

Credit card : Please keep on file / we will supply with each order (circle one)

Card number (only visa or mastercard): _____ CVC: _____

Expiry date: __/__/__ Name on Card: _____ **OR**

We will pay by EFT to account: Traditional Medicine Supplies Pty Ltd

BSB: 112 879

Account No.: 043899693 SWIFT CODE: SGBLAU2S

SIGNED _____ NAME _____