

426 King Street  
 Newcastle NSW 2300  
 Phone: 1300 441 433  
 Email: [cardrequests@pegasus.net.au](mailto:cardrequests@pegasus.net.au)

COMPANY DETAILS			
Company Name			
Contact Name		Phone	
Date Required			

CARD HOLDER DETAILS			
Surname		Given Names	
Date of Birth		Card ID number	
Street Address			
Town / Suburb			
State		Postcode	
Postal address (to send card)			

PAYMENT OPTIONS		DETAILS	
Payment Total	\$33.00 (most sites)	Incl GST Amount	\$3.00
Credit Card	Bankcard	_____ - - - / - - - / - - - / - - - Expiry: ____ / ____ CVV # ____ - ____ (last 3 digits on back of card)	
	Mastercard		
	VISA		

Please complete this form and email it to [cardrequests@pegasus.net.au](mailto:cardrequests@pegasus.net.au). Once processed, the card will be posted to the address listed above.

To accept these conditions, sign here:

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OFFICE USE ONLY			
Card printed by (initials)		Invoice No	
Posted (date)			