



Prepay - Application Form

Subscriber details

Surname / Company name: _____

First name / Authorised signatory

Name: *Mr / Mrs / Miss* _____

ID no/ Passport: _____ Business reg. no: _____

Address: _____

Contact no: _____

Order details

☐ New prepay number: _____

☐ Reallocation of number on ICCID: _____

☐ Cancellation of number: _____ because of _____

☐ Yes ☐ No - I hereby give my consent to Cellplus Ltd and its affiliates for informing me about its/their products and services, promotions, loyalty schemes and discount programmes.

I hereby certify that the above information is true and correct to the best of my knowledge and this application is subject to Cellplus Mobile Communications Ltd Terms and Conditions.

I hereby confirm that I have read, understood and agreed to be bound by the said Terms and Conditions.

Full name: _____

Signature: _____ Date: _____