



Application Form

AND DEBIT ORDER MANDATE
Email to: applications@televido.co.za

PLEASE NOTE A DELIVERY FEE
OF R120 APPLIES

A PRODUCT OF WESTREAM PTY LTD

ID

PERSONAL DETAILS:

MR / MRS / MISS

NAME:

SURNAME:

PASSPORT / ID NUMBER:

CELL NO:

PHYSICAL ADDRESS:

POSTAL CODE:

NB: You can only use YOUR OWN cell no

PLEASE SELECT THE SERVICES YOU WANT TO SUBSCRIBE TO:

TELEVIDO
STANDARD:

R175 P/M

TELEVIDO
PLUS:

R225 P/M

MY FAMILY
CINEMA:

R85 P/M

BANKING DETAILS (To be used for the monthly debit order):

BANK:

BRANCH:

ACC
NAME:

ACC
NO:

I hereby authorize WeStream TV (Pty) Ltd to
debit my account directly for the amount due
for my subscription monthly, on the first day of the month.
I have signed the attached debit order form

SIGNATURE:

FOR OFFICE USE ONLY: DEPOSITS:

CARD

EFT

CASH

BANKING DETAILS:
Acc Name: WESTREAM TV PTY LTD
Bank: FNB
Acc No: 62809082837
Branch: 25 53 55
Reference: Your ID or
FULL NAME & SURNAME