

AXIS TRAVEL CENTRE. 311 Glen Osmond Road, Glenunga, 5064, South Australia. TEL: 08 84331111

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["S.O.F."] - APPLICATION FORM SIGNATURE ON

Cardmembers must provide with this application a copy of the front and back of CARD to be used + copy of cardmembers valid passport and/or Drivers Licence. This can be done by either scanning or photographing via your phone, and sent back to us. This is mandatory, not optional, as many suppliers now require these items as well.

PERSUN	IAL DETAIL								
TITLE	FIRST NAME(S)		(as per Passport)		LAST NAME				
ADDRESS									
SUBURB			POSTCODE	STATE	EMAIL ADDRESS				
SUBURD		POSICODE STATE		LIVIAIL ADDRESS					
PHONE (Home)		PHONE (Work)		MOBI	MOBILE		FAX		
(come)		- (- ,							
PASSPORT NUMBER		COUNTRY OF ISSUE		PASSPORT ISSUE DATE		TE	PASSPORT EXP DATE		
DATE OF BIRTH		COUNTRY OF BIRTH		DRIVERS LIC. NO:			ISSUING STATE		
TRAVEL PREFERENCES									
Airline/Hotel Affiliation Group/Rental Car Company					*PIN NO and OTHER SPECIAL REQUIREMENTS				
*You may place your PIN # here, if you wish us to assist you with Frequent flyer redemption bookings or assistance.									
CREDIT CHARGE CARD DETAILS									
CARD TYPE									
(Amex, Visa, Mastercard, Diners, De			ebit) NAME OF CA		ARDME	RDMEMBER		CARD LEVEL/COLOUR	
CARD AULAARER									
CARD NUMBER ID/ CSV # On front (AMEX) or Back (MC/VI)									
CARD BILLING ADDRESS						POST CODE	STATE	COUNTRY	
CARD DILLING ADDRESS				1031 0352 317			JIAIL	COOMIN	
CARD START RATE CARD EVA RATE CARDMEMBER AUTHORITY FOR A 3 rd PARTY TO USE MY CARD									
(ARI)					retary/PA/Family etc)				
Possible Authority						ity I may give v	will be fo	or :	
I (the card member) authorise Axis Travel Centre or its nominated suppliers/carriers									
relevant to my requested travel booking components to debit charges , as instructed by me , to the value of either									
☐ \$ (if applicable) OR ☐ as I request on each occasion.									
I acknowledge that it is my responsibility to advise Axis Travel Centre should my card details , my authority level or my									
personal data change and I understand and accept that Airline/Supplier/Agency fees and conditions apply.									
SIGNATURE: DATE:									
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