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CREDIT CARD WRITTEN AUTHORISATION

To be completed by credit card holder: Please tick ☐ MasterCard or ☐ Visa

I _____ (Print Name)

Authorise Qured Pty Ltd to debit my credit card;

_____ EXP ____/____ CSV _____

For all ongoing payments for _____
(Contract holders name in full as it appears on your Invoice)

'Enter you Qured' account Number here. _____

(Card holders Signature **)

Date: _____
(Today's Date)

I do not want the contract put in my name. Tick this Box ☐

To be completed by contract holder

I _____ agree that all ongoing
(Contract holders name)

Payments will be made by _____
(Credit card holder's name goes here)

I fully understand that I will remain responsible for all fees and charges, in accordance with the Terms and Conditions outlined within my Customer Agreement for my services.

(Card holders Signature **)

Date: _____
(Today's Date)

Note both ** sections need to be signed. Please email this form back to info@qured.com.au