

Additional GOPP Card Holder & Bunnings PowerPass Form

GOPP Number

Trading Name

Contact Person

PLEASE POST TO

Print Name/s of additional persons receiving a GOPP Card and authorised to bill to this account.

****PLEASE send a photo of each new card holder to info@gopp.com.au or send to 0418 555 422****

1.Bunnings PowerPass Card Y/N

Mobile No Email.....

2.Bunnings PowerPass Card Y/N

Mobile No Email.....

3.Bunnings PowerPass Card Y/N

Mobile No Email.....

4.Bunnings PowerPass Card Y/N

Mobile No Email.....

TERMS & CONDITIONS OF ADDING ADDITIONAL CARDHOLDERS

I/We (as Owners/Directors/Committee for the above entity) agree to the following Terms & Conditions:

- NOTE: The account owner is responsible for all charges made with these GOPP cards
- IMPORTANT NOTE: Ensure that when an employee leaves the business the GOPP card is taken back off them and you advise GOPP ASAP. The cancelled GOPP must be destroyed and all changes remains the entities responsibility until this is done.
- GOPP can provide a form for employees/committee to sign to ensure they are responsible if they use their GOPP Card for personal use. Contact us at info@gopp.com.au for a copy. We strongly recommend this for all employee cards to protect you against fraudulent use.

- That any change in the trading address, legal entity, structure of management or control of the applicant will be advised to GOPP
- We agree that we will be responsible for any fees associated with collection of outstanding amounts owing to GOPP
- Any changes to our authorised card holders will be advised to GOPP ASAP.
- The entity is responsible for all purchases unless GOPP is advised the GOPP Membership card has been lost/stolen or cancelled and advised to GOPP in writing.

Signed for and on behalf of the Applicant pursuant to Section 127 of the Corporations Act 2001:

COMPANY (PTY LTD)

Director/Secretary

Print Authorised signature's full name.

Dated ____/____/____

INDIVIDUAL / PARTNERSHIP

Business Owner

Print Authorised signature's full name.

Dated ____/____/____

CLUBS OR COMMUNITY ORGANISATIONS

Committee Person

Print Authorised signature's full name.

Role on the Committee

Dated ____/____/____