

Bill to Name: _____



Address _____ City _____ State _____ Zip _____

1234 Court Street # B Clearwater, Florida USA 33756

800-685-0335 Fax 800-615-1326



INTL' ORDER FORM

Rep Code & Name 15936	Rep # 8092
Services Ordered <input type="checkbox"/> GACB <input type="checkbox"/> Spectra <input type="checkbox"/> GA 800 <input type="checkbox"/> VIP <input type="checkbox"/> GA Mobile	

Name: _____ Business Residence GA Direct

Company Name: _____

Address: _____
Street Address City State Zip

BTN Phone #: _____ Fax #: _____ E-Mail: _____

Check Here For GA Telecard Card Limit: _____ # Cards: _____ Name on Card: _____

Undersigned Customer hereby requests Global Access™ international long distance service from Telegroup. If this service order is granted and either credit card or bank debit is the payment method, Customer authorizes Telegroup to either charge the above-listed credit card number or automatically debit the above listed bank account for all charges attributable to the service ordered. If credit card billing is selected, the undersigned understands that the same terms and conditions normally governing the use of credit card apply to this use as well. Customer authorizes Telegroup and its agents to preform credit checks and to investigate the bank references and other credit or financial information or references submitted to Telegroup, where permitted. The undersigned represents that he/she has authority to request Global Access service(s) for the customer, that the customer understands rates are subject to change without notice, that Customer acknowledges that Telegroup Agent has informed Customer of the Global Access Callback Minimum Policy in effect; that the Customer understands the Policy and agrees to cover the charges it specifics; that the Customer further acknowledges that the Policy is subject to change. If Customer orders Dialers, the Customer (a) acknowledges the Telegroup Technologies dialer(s) are leased to the customer for specific use with Telegroup Services only (b) authorizes the Telegroup Technologies Programming & Provisioning fee to be charged to their Telegroup account. All our transactions are subject to our General Conditions, which will be sent to you at your request.

Printed Name _____

Authorized Signature _____

Date Signed _____

AUTHORIZATION FOR PAYMENT BY CREDIT CARD

Undersigned customer hereby authorizes Telegroup to charge the below-listed credit card number in payment for discounted long distance service through Telegroup. The undersigned understands that the same terms and conditions normally governing the use of the credit card apply to this use as well. The undersigned customer authorizes Telegroup and its agents to perform credit checks and other credit or financial information or references submitted to Telegroup where permitted. *The customer can cancel the service at any time through Customer Service.* The undersigned represents that he/she has authority to request service(s) for the customer.

Credit Card (Please circle one): Amex Diner's Discover VISA Master/Eurocard

Credit Card # _____ - _____ - _____ - _____ Expiration Date: _____

Card Holder's Name: (Print) _____

Card Holder's Signature: _____ Date Signed: _____

Please identify billing telephone numbers, including country codes, and list additional telephone lines under the billing telephone number.

Usage \$ Month U.S.

Lines

<input type="checkbox"/> Issue a NEW toll-free 888 number. List # it should ring on below	<input type="checkbox"/> Put my EXISTING toll free numbers listed below on your service	Area of Service
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Numbers to be Called Back (Include Country Codes)

International 888/800#'s / phone # it rings on	Rate
_____ / _____	

Company Name _____

Billing Address _____

Local Telephone Co. _____ Current Long Distance _____