

Date	
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FOREX ORDER FORM

ITC NAME(VERY IMPORTANT):	Susan Roth / Upstream Travel
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CONTACT PERSON:

Surname:	
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First Name	
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Contact Number	
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Authorised by	
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Date to be Processed	
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Date of Delivery	
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Time	
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COMMENTS

ORDER DETAILS

Currency	Product	Foreign Amount	or	Rand Amount	Denominations

Commission:		Included		Excluded
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Method of Payment:	Credit Card		Cash		EFT		Authorised Cheque	
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IF PAYMENT BY CREDIT CARD:

Card Number:	
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Expiry Date:	
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CVV Number	
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CLIENT DETAILS:

* Compulsory (Company Name & Registration Number only compulsory for Business Travel)

Company Name	*
Traveller's Surname	*
Identity Number	*
Nationality	

Registration Number	*
Traveller's First Name	*
Passport Number	*

Residential Address: *	
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Delivery Address: *	
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Cellular	*	
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Home	*	
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Work	*	
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MODE OF TRANSPORT:

Date of Departure	*	Ref. No.	*	Destination	*
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Air	x	Train		Ship		Car		Other	
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Bop Category (Please tick Appropriate Box)

303	Resident Business Travel		305	Study Allowance	
304	Resident Individual Travel		501	Gift	
253	Non Res Business Travel		504	Donations	
254	Non Res Individual Travel		509	Maintenance	
260	Land Arrangements				

Declaration:

- I /We hereby confirm having read & understood the above information is true and correct and that
- I will indeed travel 60 days from the date of the request to be afforded foreign exchange and,
- I will not purchase foreign exchange from and Authorised Dealer and/or and ADLA in excess of the applicable limits and,
- I will refund all foreign exchange accorded in the event of the trip being cancelled, to an Authorised dealer and/or an ADLA within 30 days of cancellation.
- I understand that it is my responsibility to inform Travelex of all changes to the details of the entity on whose behalf I am acting, whether it be contact details or any other details relevant to such entity.
- I/We hereby acknowledge that Travelex is not liable for omissions or delays in transmissions arising from circumstances beyond its control.
- I/We will be returning to South Africa in due course.

For and on behalf of	Signature of Applicant/Authorised Signatory	Date
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