APPLICATION for 2019 Satellite Telephone (Non-HF) Authority to use the VKS-737 Radio Network

PLEASE CLEARLY PRINT ALL DETAILS

First Name _____ Spouse/Partner _____

Surname _____ Surname _____

Street / PO Box _____

Suburb _____ State _____ Postcode ___ ___ ___ ___

Telephone No. (___ ___) ___ ___ ___ ___ ___ ___ ___ ___ Mobile Phone No. ___ ___ ___ ___ ___ ___ ___ ___ ___ ___

e-mail address _____

Satellite Phone: Make _____ Model _____ Service Provider _____

Satellite Phone Number: ___ ___ ___ ___ ___ ___ ___ ___ ___ ___

Vehicle / Vessel / Aircraft in which Satellite Phone is used:

Make _____ Model / Type _____

Colour _____ Registration No. _____

Emergency Contact (Name) _____ Telephone (___ ___) ___ ___ ___ ___ ___ ___ ___ ___

Mobile ___ ___ ___ ___ ___ ___ ___ ___ ___ ___

Emergency Contact (Name) _____ Telephone (___ ___) ___ ___ ___ ___ ___ ___ ___ ___

Mobile ___ ___ ___ ___ ___ ___ ___ ___ ___ ___

I hereby apply for authorisation to use the VKS-737 **Satellite Phone** service from 1st December 2018 until 30th November 2019 and agree to be bound by the conditions of use, as set out in VKS-737 document DOC 21 "Conditions of Use of the VKS-737 Radio Network", and regulations, conditions and interpretations as determined by the Australian Communications and Media Authority. I hereby acknowledge that a Satellite Phone Authority DOES NOT authorise operation on HF radio frequencies allocated to the VKS-737 Radio Network.

Where applicable, pro-rata entitlement applies to second year subscription only.

Signature _____ Date __ __ / __ __ / __ __

Forward completed Application and payment to:

VKS-737 Radio Network - PO Box 2101, ELIZABETH PARK. SA. 5113.

(Subject to your payment method completed applications will be accepted by email)

Telephone: (08) 7325 2600 **e-mail: info@vks737.on.net** website: www.vks737.on.net

THIS FORM WILL NOT BE ACCEPTED UNLESS ALL SECTIONS ABOVE ARE FULLY COMPLETED

Privacy Statement:
The information on this form is collected and stored for the management of the Network and its activities. It will be used by Head Office Staff, and portions may also be provided to Committee members and Base Station Operators from time-to-time when necessary for carrying out Network duties or activities. Some details may be provided to other entities (eg ACMA, Emergency Services Organisations) in relation to Network activities. ONLY your Name(s), Callsign & Selcall Details will be published in the Network User lists, both in printed form and on our website. No other details will be published. Full details of our Privacy Policy can be found in the Privacy Code of Practice available from VKS-737 Head Office or from our website.

REMITTANCE ADVICE – This is a Tax Invoice for GST when payment is made.

Please make a copy for your records.

Licence Authority Fees are inclusive of GST. ABN 92 486 729 762

☐ Please find enclosed my cheque / money order for $100.00

Cheques and Money Orders should be made payable to VKS-737 Radio Network

☐ Please charge the following credit card for $100.00 plus 1.5% surcharge for MasterCard / Visa Card / American Express

Type of Credit Card ☐ MasterCard ☐ Visa ☐ American Express

Card Number Verification Code Expiry Date

|__|__|__|__| |__|__|__|__| |__|__|__|__| |__|__|__|__| |__|__|__| __ __ / __ __

Name on Card: _____ Card Holders Signature: _____

☐ I have paid $100.00 directly into the following Bank Account on the __ __ / __ __ / __ __

A copy of your Banking Receipt MUST be attached to this form.

Bank: BankSA, Gawler. South Australia. BSB Number: 105 009

Account Name: VKS-737 Radio Network Account Number: 099 696 840

Reference used: _____

(Please use your name as reference when making payment)