

Authorised Contact Form

Complete this form if to add an authorised/secondary contact to your account. An authorised contact is able to call us on your behalf and, provided they pass the security questions, will have full access to your account and service(s).

Please complete this form in black or blue pen and send:

By post MEDION Mobile, PO Box 730, Chatswood NSW 2057

By fax 02 9478 0291

Section 1 – Account Holder Details

Full name and title	
Date of birth	/ /
Contact number	
Email address	
Physical address	

Section 2 – Authorised Contact Details

Relationship to account holder	
Full name and title	
Date of birth	/ /
Contact number	
Email address	
Physical address	

Section 3 – Declaration to be signed by the Account Holder

acknowledge that:

I understand that the person/people listed in the Authorised Contact Details section of this form will be authorised to act on my behalf in contacting ALDImobile in relation to my account. I understand that they will still be required to verify details about my account, for example my name and password/PIN, alternatively 4 points of identification relating to them that they have supplied on this form. I understand that as the Account Holder, I am responsible for ensuring the account is paid on time and any credit management procedures will involve the account holder only.

Full name	
Signature	
Date	/ /

Thank you

We will be in touch once the Authorised Contact has been added to your account, or if we need any additional information from you.