PURCHASER/BIDDER REGISTRATION

This Registration can be completed online at www.nzb.co.nz/resources

Full name of person/partnership/company to be invoiced:		
If company/partnership, full name of person acting on behalf:		
Date of birth of person, or company number:		Occupation:
Residential Address or Registered Office:		
Postal Address:		
Home Phone:	Business Phone:	Mobile:
Email:		Fax number:
Trade/credit references:		
1.		
2.		
Amount of intending purchase(s): $NZ\$$		
Method of payment (please circle):		
CASH EFTPOS	CHEQUE	EFT
(NB: There is no credit card facility and personal cheques accepted subject to clearance)		
ALL PAYMENTS MUST BE MADE IN NEW ZEALAND DOLLARS		
I/we acknowledge that I/we have read and agree to be bound by the Conditions of Sale, and I/we authorise New Zealand Bloodstock Ltd to contact third parties for the purpose of assessing this application and authorise irrevocably, these third parties to provide all information requested by New Zealand Bloodstock Ltd.		
SIGNATURE:		DATE:
REGISTRATION FORMS MUST BE COMPLETED, SIGNED & RETURNED TO: New Zealand Bloodstock Ltd, PO Box 97447, Manukau City, Auckland 2241, New Zealand		
Email: reception@nzb.co.nz	Phone: +64 9 298 0055	Fax: +64 9 298 0506
FILE REFERENCE: REGISTRATION CODE:		