

Business Partner Programme Service Agreement 2017/18

Business Details

Business name:

Trading name:

Qualmark rating:

Postal address:

City:

Postcode:

Physical address:

City:

Postcode:

Email:

Phone number:

Website:

Primary Contact Person name:

Job title:

Phone number:

Mobile:

Email:

Alternative Contact Person name:

Job title:

Phone number:

Mobile:

Email:

General Business Partner

General partner \$224.25 (incl. GST) until 30 June 2017

Please tick one answer on each line

I agree to pay commission on bookings made by the Christchurch i-Site Visitor Centre at the following rate:

12.5%

15%*

20%*

* Some operators voluntarily choose to support ChristchurchNZ at a higher level

When the client books my service or product, please take:

Full payment

Deposit

Referral

Payment Details

ChristchurchNZ will pay you by direct credit for all products sold on your behalf. Please provide the following details:

Name of bank account:

GST Number:

Bank account number:

(XX-XXXX-XXXXXXXX-XXX)

Accounts / Finance email:

I agree that ChristchurchNZ may send emails to the addresses above under the terms of the Electronic Messaging Act 2007

I have read and agree to the terms and conditions of the ChristchurchNZ Business Partner Programme

I confirm that I have a Health and Safety Policy that complies with New Zealand legislation

THIS AGREEMENT WILL AUTOMATICALLY RENEW UNLESS CANCELLED IN WRITING 1 MONTH PRIOR TO RENEWAL

Signature of person authorising:

Date:

Name: