





## HOLIDAY PAYMENT PLAN SET UP FORM

### CUSTOMER DETAILS

Customer Name	
Departure Date	
Address (No PO Boxes)	
Email Address	
Mobile Phone	□□□□ □□□ □□□
Home Phone	□□ □□□□ □□□□
Date of Birth	□□/□□/□□□□

**PLEASE ENSURE YOU FORWARD A COPY OF PHOTO ID (VALID PASSPORT OR DRIVERS LICENCE) WHEN YOU SUBMIT THIS FORM**

### PAYMENT DETAILS

Total Travel Cost	\$ □□, □□□. □□
Pay Over	<input type="checkbox"/> 2 Months <input type="checkbox"/> 3 Months <input type="checkbox"/> 4 Months <input type="checkbox"/> 5 Months <input type="checkbox"/> 6 Months Choose 2, 3, 4, 5 or 6 equal payments
Credit / Debit Card	<input type="checkbox"/> 2 Months <input type="checkbox"/> 3 Months <input type="checkbox"/> 4 Months <input type="checkbox"/> 5 Months <input type="checkbox"/> 6 Months • Your first payment plus the joining fee will be processed upon setup. • Subsequent payments will be processed on the same date of subsequent months.
	□□□□□□□□□□□□□□□□   Expiry Date □□/□□ Card Name _____

**INCLUDE A FRONT AND BACK COPY OF YOUR CREDIT CARD WITH YOUR APPLICATION.**

### AGENT DECLARATION

I agree to be bound by my Payment Plan Agent Activation Form and the Travel Agent Terms and Conditions. I declare that the information in this Payment Plan application is true and correct and that I have made the required arrangements to book the documented travel for the customer. I agree that no additional charges may be subsequently applied to the customer's travel booking (including currency surcharges or price increases but not including cancellation or change fees) once this application has been accepted by Payment Plan. I agree to receive and act immediately upon any instructions from Payment Plan in relation to this booking including cancelling or amending bookings, and to obtain and return to Payment Plan all available refunds in applicable circumstances including a failure of the customer to successfully pay the Payment Plan instalments.

Agent Signature	_____ Date: □□/□□/□□□□
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### CUSTOMER DECLARATION

I hereby register with British Travel (BT) & request BT to process from my nominated card in accordance with this Holiday Payment Plan Set Up Form (HPPSF). I understand that there is a non-refundable establishment fee of \$100, which will be charged upon set-up of this facility and a card processing fee of 2.5% (incl. GST) which will be added to each payment transaction. By signing this form, I confirm the information above is true and correct, that I have read, understand and agree to be bound by the HPPSF and the British Travel Payment Plan Customer Terms & Conditions. I provide a non-revocable authority to British Travel (including for cancelling or amending my travel) until all instalments have been successfully paid. I relinquish my right to contest the purchase or to cancel payment on my credit or debit card and understand that there will be a \$50 dishonour fee in the event of any failed payment. In the event of a payment failure, British Travel will attempt to contact you to organise another payment method but your travel will be cancelled and forfeited if the required amount due is not successfully processed within 5 days.

Customer Signature	_____ Date: □□/□□/□□□□
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**SCAN & EMAIL TO INFO@BRITISHTRAVEL.COM.AU**