



To pay your VNGS account by Credit Card,
simply complete this form
and return by mail to:

Vodafone Next Generation Services Limited
PO Box 3296, Shortland Street,
Auckland 1140

VNGS will notify you once your application
has been approved

VNGS OFFICE USE ONLY

Date input ___/___/___

Initials:

Credit Card – Payment Form

Customer Details

Your Name: Mr Mrs Miss Ms _____

Contact Telephone Number:() _____

Vodafone Next Generation Services Limited (previously WXC) Account Number(s):

Your Credit Card Details

Credit Card type (please tick one box)

Visa Amex Diners MasterCard

Credit Card Number

Expiry Date: ___/___

Card Security Code (CSC)

Your signature (Credit Card account holder to sign only)

Authorised Signature: _____

Yes, I wish to have my payments automatically deducted from my credit card.