PTT Limited

PO Box 84-112, Westgate, Auckland, New Zealand
PH: 0800 335 445 FAX: 0800 268 888

REGISTRATION

CLIENT DETAILS:

Full Name:
Address:

Contact No:
Email Address:

PAYMENT DETAILS:
I hereby authorize PTT Limited to debit my card with the following

Amount NZD $13,800 inclusive of GST being full payment for the **FX Currency Trader Program.**

VISA ☐ MASTERCARD ■ AMEX ☐

Name on Card:
Card No:
Expiry Date:
Amount: $6,500 + GST
incl.

Client Signature _____ Date 8-10-2016

Please sign above and fax to **0800 268 888**
And
Bank Transfer the sum of **$7,300 + GST** being full payment for the **FX Currency Trader Program.**
incl.

ANZ Bank,
Account Name: PTT Limited
Branch Number: 011159 Account Number: 019160800

PTT Limited

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CONTRACT

Between

The Client,

Of:

Contact No:

And the Company:

PTT Ltd

I, the client, hereby agree to purchase the **FX Currency Trader Program.** It is to be supplied for the consideration of $13,800 inclusive of GST. The Company hereby agrees to supply alerts based on the programs technical analysis criteria. The criteria is not financial advice, nor should be taken as financial advice, It is a technically driven suggestion. The alerts will be delivered via text, or any other normal and agreed electronic or telephonic means that may be requested by the client for the full FX Currency Trader Program printouts. This information will be supplied to the named client for the agreed period of 3 years. I the client am aware I have purchased an educational training system. Both parties agree and understand that there is inherent risk in trading and should seek further advice regarding individual financial circumstances.

For and behalf of PTT Ltd

Company Representative
Signature _____ _____

Signature of client _____