

basic website listing application

All fields marked with * are mandatory

Complete form and fax to 0866738667 or email to info@durbanville.info

DATE:	
* TITLE:	
* NAME:	
* SURNAME:	
* NAME OF BUSINESS/SERVICE:	
* PHYSICAL ADDRESS OF BUSINESS/SERVICE:	
P O BOX ADDRESS OF BUSINESS/SERVICE:	
EMAIL ADDRESS:	
WEB ADDRESS (IF APPLICABLE):	
MOBILE NUMBER:	
* TELEPHONE NUMBER & CODE:	
FAX NUMBER & CODE:	
* DESCRIPTION OF BUSINESS/SERVICE (NO MORE THAN 50 WORDS):	

PRINT NAME & SURNAME: SIGNATURE: