

authorisation form



Freephone

0800 507 807

Freefax

0800 802 820

Use this form if you wish to be the authorised buyer of school uniforms at your school.

School name _____

I will be the authorised buyer of SchoolTex products for this school.

Contact person _____

Job title _____

Email _____

Signature _____

I authorise the above person to order SchoolTex products on behalf of our school.

Name _____

Job title _____

Signature _____

Thank you, once we have received this information we will email you your school password so you can make the most of discounts available to schools.

PLEASE CONTACT US IMMEDIATELY IF THE AUTHORISED BUYER CHANGES.

Fax this form to 0800 802 820 or Post to SchoolTex PO Box 4525, Christchurch, NZ.