



ORDER FORM

P.O. Box 31143, Tokai, 7966 Tel: 021 712 7800 Fax: 021 712 2639 email: info@computers4kids.co.za

School Name: _____

Contact Person: : _____

Delivery Address: _____

_____ Postal Code: _____

Phone: (____) _____ Fax: (____) _____ e-mail: _____

Please note that all the figures below are including VAT

Quantity	Description	Unit Price	Total
	Volume R file (Pre school / Grade R) - 23 integrated ICT lessons	R228.00	
	Volume 1 file (approx. Grade R-2) - 23 integrated ICT lessons	R228.00	
	Volume 2 file (approx. Grade 1-3) - 23 integrated ICT lessons	R228.00	
	Volume 3 file (approx. Grade 2-4) - 23 integrated ICT lessons	R228.00	
	Volume 4 file (approx. Grade 3-5) - 23 integrated ICT lessons	R228.00	
	Volume 5 file (approx. Grade 4-6) - 23 integrated ICT lessons	R228.00	
	Volume 6 file (approx. Grade 5-7) - 23 integrated ICT lessons	R228.00	
	Volume 7 file (approx. Grade 6-7+) - 23 integrated ICT lessons	R228.00	
	Install CD	R57.00	
	Access to ICT resources: R24 per learner per month *	R24.00	
Version required: <input type="checkbox"/> Open Office <input type="checkbox"/> MS Office 2003 <input type="checkbox"/> MS Office 2007			
Signed: _____ Date: _____		Subtotal	
		Courier	R114.00
		Grand Total	

Note:

1. Please note that the attached debit order needs to be signed and submitted together with this order form. The first month's debit will include the files and any additional items ordered. As from month 2, the debit order will only include the learner's fees of R24.00 per learner per month.
2. The minimum contract term is 12 months.
3. *ALL students who are using the resources and material at the above school are required to pay the monthly access fee.
4. International ICT certification (e-Learner from ICDL Foundation), recognized in 145 countries, is available as an option for all primary school learners. Please contact us for further information: info@e-learner.mobi

Debit Order Application

School Details	
Name of School	
Name of Authorised Signatory	
Telephone Number	
E-mail address	
School Postal Address	
	Postal Code:

Debit Order Details (School's bank Details)			
Name of account			
Bank name		Branch name	
Branch code		Type of account	
Name of Authorised Signatory			
ID of Authorised Signatory			

Financial details and run date	
Debit Order Amount	
Start Month	
Date of Debit Order run (1 st to 3 rd of month)	

Terms and Conditions

The undersigned is authorised to sign this document.

The undersigned authorizes Computers 4 Kids Kids cc or its nominee to deduct the relevant funds from the account.

The amount deducted monthly will be in accordance with the contractually agreed fee.

Signed at _____ on this ____ day of _____ 20__

Authorised Signature: _____

Print Name: _____

Please fax this debit order authority to 021 712 2639 or email to finance@computers4kids.co.za

