



Registration Form

Please complete in BLOCK CAPITALS

Trading Name:
VAT Registration No. (if applicable):

Customer Name: Title: First Name:..... Surname:

Address:

..... Postcode:

Mobile No.: Tel No.:

Tel No.: Fax No.:

Email:

Nature of Business i.e. Landscape Contractor/Maintenance/Fencing etc.
(please supply Business Card/Letterhead)

Do you issue order numbers for all purchases? Yes No

Do you require more than one card? Quantity (max. 4)

The successful operation of this scheme will involve regularly updating our Professional Traders with current offers and product news. Email is our preferred method to transmit this information. Kindly advise if you agree to receive updates by Email or by Post

Adrian Hall Ltd. reassure you that your information will not be passed to any Third Party.

I confirm receipt of a copy of the terms and conditions relating to the Adrian Hall "Professional Trader Plus" Scheme.

Signed:..... Date:

For office use:
Account No.: A/C Type:
Card No.: Entered by:
Identity Code: Date Entered:

Please return completed form to: The Garden Centre, Snakey Lane, Feltham, Middlesex, TW13 7ND