



Please return completed form to:
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CUSTOMER ORDER & CONFIRMATION

Purchase Order Ref: (please attach original)	Sales Agent Name:	
Company Name:	Physical address of Installation:	
ABN:		

PLAN TABLE (ex-GST)

Option	Plan	Speed	Data Quota	Monthly Cost	Hardware Charge	Contract Term	Excess Charge (/ Mb)
	MedSat Business 1	1024/256	1 GB	\$149.00		12months	\$0.20
	MedSat Business 4	1024/256	4 GB	\$242.00		12months	\$0.20
	MedSat Business 8	1024/256	8 GB	\$423.00		12months	\$0.20
	MedSat Business 12	1024/256	12GB	\$565.00		12months	\$0.20
	MedSat Business 16	1024/256	16GB	\$752.00		12months	\$0.20
	MedSat Business 22	1024/256	22GB	\$995.00		12months	\$0.20
	MedSat Sky-link 1E	256/64	500Mb	\$ 29.00		12months	\$0
	MedSat Sky-Link 2T	512/128	3Gb	\$ 55.00		12months	\$0
	MedSat Sky-Link 3V	1024/256	5 Gb	\$ 95.00		12 months	\$0

INSTALLATION OPTION

Medsat can organise to install your service. This service will be in addition to the charges outlined in the plan table. As an estimate, Medsat charges \$800.00 (ex-GST) for a standard installation. The actual cost of your installation may be less or more than this amount. Please select one of the two options below.

- I would like Medsat to install my service.
- I will arrange my own installation of my service (Equipment freight charges will apply).

NETPHONE (ex-GST)

Service	No of services	Connection Charge p/connection	Monthly fee p/connection
Netphone		\$45	\$10

Two enabled RJ-11 telephone ports are supplied as standard. Additional phone ports are available by purchasing additional equipment.

BILLING DETAILS

Contact Name: _____ POSITION: _____

Contact Number: _____ TEL: _____ FAX: _____

EMAIL: _____

Billing Address: _____

Payment: Account (By arrangement) Credit Card Type of Card Visa Mastercard

Name on Card: _____

Card Number: _____ Exp / _____

Signature: _____

TECHNICAL DETAILS

TECHNICAL AND SITE DETAILS:

1. Site Name: _____
2. Technical Contact Name: _____
3. Technical Contact Number: _____
4. Technical Contact Email: _____

CONDITIONS

1. The provider of the Service is Orion Satellite Systems (ACN 103 918 832) t/a Orion ("Orion").
2. This application for the Service is subject to Orion's Standard Terms and Conditions.
3. All monthly fees are payable in advance and any phone charges and additional megabyte charges are payable in arrears at the end of each month.
4. All prices quoted are exclusive of GST. A GST tax invoice will be issued for the charges associated against the Service.
5. We cannot guarantee that your preferred username/email will be available.
6. Services will generally be provisioned within 14 working days from receipt of signed Service application form, subject to equipment availability, delivery and installation.
7. Service billing commences from the date when the Service is commissioned. In the first month you will receive two invoices. The first monthly invoice will include a full month's Service fee in advance and the a pro-rata fee for the first month.. An additional invoice will be issued for equipment and any applicable installation costs. Standard payment terms are 7 days net from date of invoice.
8. The monthly data quota includes all upload and download activity.
9. If you terminate your agreement with Medsat prior to the expiry of any agreed contract term, you must pay all monthly access fees for the balance of the said term. Refer to the Orion Terms and Conditions at <http://www.orionsat.com.au> and supplied to you by Orion for exclusions and conditions.

Telephone service

In-bound telephone numbers can be issued to you upon the commissioning of the Service. Whilst the Service may allow you make and receive telephone calls, restrictions exist which limit the functionality of the Service in this regard. These include (but are not limited to) the following:

- (a) Local number portability is not supported.
- (b) **THE SERVICE CANNOT BE RELIED UPON FOR MAKING EMERGENCY CALLS.** Whilst every effort will be made to produce a reliable service, a contingency plan separate to the Service should be developed for handling emergency communication requirements.

ACKNOWLEDGMENT AND AGREEMENT

1. I hereby apply for the provision of the Service by MedSat as indicated in this application document.
2. I acknowledge and agree that:
 - a. I have read the conditions applicable to the use of the telephone service, and understand the implications for emergency calls.
 - b. I have received a copy of, and agree that this agreement is bound by, the Orion Terms and Conditions and that a copy has been provided to me as a part of this application for the Service.

Full Name: _____ Position: _____

Signature: _____ Date: _____