



# School Customer Application Form

This form is required for schools to be able to purchase services from ATNZ. It is used to set up your school in our accounts system and is intended for those who will receive, process, and pay invoices from ATNZ. All invoices will be sent via email. **Please fill in this form and email it to [gateway@atnz.org.nz](mailto:gateway@atnz.org.nz)**

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**Name of school:**

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**Street Address:**

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**Suburb:**

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**Postcode:**

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**City:**

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**Phone  
Number:**

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**Invoice Contact  
Person:**

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**Invoice Contact  
Email:**

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**IRD Number:**

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**Secondary  
Contact:**

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**Secondary  
Email Address:**

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**Secondary  
Phone Number:**

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