

CREDIT CARD INSTALLMENT AUTHORIZATION FORM

To: Subscription Unit, The New Straits Times Press (M) Bhd

Fax: 03-2282 5502

(A) CARDHOLDER'S PARTICULARS

Name of Cardholder: _____

NRIC No: _____

Visa/MasterCard/AMEX No. _____

Expiry Date: _____ CVC/CVV2: _____

Card Issuing Bank: _____

Cardholder Contact No: _____ (Hse) _____ (Off)

_____ (H/P)

(B) PAYMENT INFORMATION

Please (✓) Selection	Subscription Package	Package Price (RM)	Equivalent Monthly Installment	Signature To Confirm Selection
	New Straits Times	RM	12	
	BH	RM	12	
	Harian Metro	RM	12	
	New Straits Times & BH	RM	12	
	New Straits Times & Harian Metro	RM	12	
	BH & Harian Metro	RM	12	
	New Straits Times & BH & Harian Metro	RM	12	

PAYMENT AUTHORISATION

1. I hereby authorize The New Straits Times Press (M) Bhd to charge the monthly installment amount to my credit card account as stated above.
2. I agree that the company is providing a service to me only, and it shall not be held liable if the subscription is rejected for whatever reasons.
3. I agree to the Terms And Conditions attached or overleaf.

Cardholder's Signature

Date

TERMS AND CONDITIONS

1. I/We accept full responsibility for all transactions arising from the use of the given credit card in this payment.
2. I/We undertake to ensure that my credit card is valid to meet the above authorization and payment.
3. I agree that the company is providing a service to me only, and it shall not be held liable if it is rejected for whatever reasons.
4. I/We agree to jointly and severally indemnify the Company in full against any claims, loss, damage, costs and expenses which the Company may suffer or incur arising from the authorization to debit the credit card account aforesaid.
5. I/We will ensure that the Company is notified immediately in writing of any changes, loss or replacement of my/our credit card. In the event I/We fail to do so, I/We hereby undertake to indemnify and hold the Company harmless and indemnified against all actions, proceedings, claims, damage, cost, expenses, demands and losses which I/We may incur or sustain.
6. I/We understand and agree that any problems or disputes arising from the processing/debiting of the credit card account will be my/our own responsibility to resolve them with my/our credit card company (include but not limited to any problems due to breakdown or malfunction or mechanical defect of the computer system or equipment of the credit card company).
7. In the event that the credit card transaction is declined, the application/renewal (whichever is applicable) as well as receipt issued are deemed automatically cancelled and the Company shall not be liable for any claim, loss, damages, cost and expenses (including consequential, incidental, general, special and indirect loss or damage or claims made on me/us or by any third party) arising whatsoever.
8. The Company reserves the right at any time to vary, add, delete or amend any of the above conditions without notice. Such amendments shall become effective on such date as the Company may elect to adopt, and the continued use of this method of payment by me/us shall constitute acceptance of the said amendments.
9. The fully completed Subscription Form and Credit Card Authorisation Form can be mailed to/dropped at NSTP Headquarters or regional offices, or faxed to 03-2282 5502.

☐

I have hereby read and understood the Terms And Conditions stated above.

Cardholder's Signature

Date