

Sender's Details	
Name:	_____
Address:	_____

City	_____
Post Code:	_____
Country:	_____
Tel: (daytime)	_____
Mobile:	_____
E-mail:	_____

Receiver's Details	
Name:	_____
Address:	_____

City	_____
Post Code:	_____
Country:	_____
Tel: (daytime)	_____
Mobile:	_____
E-mail:	_____

Details of Animal Travelling	
Name of pet:	_____
Age of pet:	_____
Breed:	_____
Sex:	<input type="checkbox"/> Male <input type="checkbox"/> Female
Do you require a kennel?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Shipment Details	
From Airport:	_____
To Airport:	_____
Service:	<input type="checkbox"/> To Airport <input type="checkbox"/> To Door
Collection:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Service Level:	<input type="checkbox"/> Economy <input type="checkbox"/> Express
Total Weight: (kg)	_____
No. of Pieces:	_____
<p>* Shipments sent "To Airport" must be collected within 24 hrs of arrival to avoid incurring storage fees.</p> <p>** For "To Door" services, someone must be available at the delivery address from 9-5pm, Monday to Friday</p>	

- Please tick this box to say that you agree to be bound by the AEP Terms and Conditions.
- Please tick this box to say that you acknowledge that our "To Airport" Service **DOES NOT INCLUDE ADDITIONAL CHARGES** such as airline handling, customs or storage fees, import duties or VAT (if any) at the airport of destination and Quarantine Fees.

Signature: _____

Date: _____

Special Instructions:

Do any items being shipped require a "CITES" permit Yes No
 Have you applied for a import/export Permit Yes No

Marketing Information:

Please help us to better tailor our marketing programme, by telling us how you heard of us:

Were you referred to us?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes , how were you referred to us?	<input type="checkbox"/> Airline <input type="checkbox"/> Travel Agent <input type="checkbox"/> Other
If Airline or Travel Agent , which one:	_____
If Travel Agent , which branch:	_____
If Travel Agent , name of Travel Consultant:	_____
If Other , please tell us how you heard of us?	_____

I _____, the agent for this shipment declare that:

1. No item could have been added whilst the shipment was in my care.
2. During the transportation the consignment was carried in a closed locked vehicle or escorted two people including the vehicle driver.

Signature of Customer	Flying Animals Stamp & Signature

PAYMENT DETAILS

I hereby authorise AEP to debit my credit/debit card account:

Type of card: VISA Master Other

Card Number:

CVC number: Valid From: / Issue No:
(switch only) (mm/yy) (switch only)

Expiry Date: (mm/yy)

Amount: .

Currency: ZAR EUR Other _____
(please specify)

GBP USD

Name on Card: _____

Address: _____

Signature: _____ Date: _____

Bank details for EFT transactions:

Company name: Airline Express products (Pty) Ltd
Bank name: Standard Bank
Branch: Kempton Park
Account number: 020226527
Branch code: 012442

Please forward proof of payment to info@flyinganimals.co.za or fax (011) 975-0355