Please choose your preferred method of payment. Print out and complete all relevant fields. Then sign and date the bottom of the form. Scan & email the completed form to ultrafast.wireless.internet@gmail.com or you may take a picture with your phone, then email it to us. For questions, please call us at 705-726-4063.

Credit Card Authorization Form

Credit Card Information				
Card Type:	☐ MasterCard	□VISA		
Cardholder Name (as shown on card):				
Expiration Date (mm/yy): CVV (3 digits):			digits) :	
above for monthly	y internet services.		r afast Wireless to charge my credi	
Pre-Authorized Debit (PAD) Form				
Banking Information				
Financial Institution: Branch Address:				
City:	Prov:	Postal Code:	Telephone:	
Institution:	Transit Numbe	r:	Account Number:	
I,, authorize Ultrafast Wireless to charge my bank account above for monthly internet services.				
	my information will otice by letter or em		acknowledge I may cancel at any ti	me with
Customer Signatu			Date	