

Lynk for Business

Account Application



Company Profile

Company Name: _____

Company Address: _____

Company Reg. No: _____

Company Industry: _____

Administrator Profile

Account Manager Name: _____

Contact Number: _____

Email Address: _____

Person responsible for invoice payment: _____

Contact Number: _____

Email Address: _____

Trade Reference

Trade Reference Company Name 1: _____

Trade Reference Contact Name and Number 1: _____

Trade Reference Company Name 2: _____

Trade Reference Contact Name and Number 2: _____

Booking Platforms

Do you require?

Online Booking: Yes No

App Booking: Yes No

Where did you hear about Lynk?

Please note credit terms are 30 days from invoice date. Any queries must be submitted in writing to accounts@lynk.ie within 14 days of invoice date.

Account Manager Signature _____ Date _____

CFO/Director/CEO Signature _____ Date _____

We endeavour to activate your account within 2 working days