



SYSTEM ACCESS ENROLLMENT FORM

Date : \_\_\_\_\_

ACCOUNT NAME	:	_____
OFFICE ADDRESS	:	_____
TELEPHONE NO.	:	_____ FAX NO : _____
Default e-mail address for Itinerary Receipts & Advisories : _____		

Booking Access	
1.) Name : _____ Email Address : _____ <input type="checkbox"/> Booking and Payment: FOP: <input type="checkbox"/> Agency Credit <input type="checkbox"/> Credit Card <input type="checkbox"/> Others : _____	2.) Name : _____ Email Address : _____ <input type="checkbox"/> Booking and Payment: FOP: <input type="checkbox"/> Agency Credit <input type="checkbox"/> Credit Card <input type="checkbox"/> Others : _____
3.) Name : _____ Email Address : _____ <input type="checkbox"/> Booking and Payment: FOP: <input type="checkbox"/> Agency Credit <input type="checkbox"/> Credit Card <input type="checkbox"/> Others : _____	4.) Name : _____ Email Address : _____ <input type="checkbox"/> Booking and Payment: FOP: <input type="checkbox"/> Agency Credit <input type="checkbox"/> Credit Card <input type="checkbox"/> Others : _____
5.) Name : _____ Email Address : _____ <input type="checkbox"/> Booking and Payment: FOP: <input type="checkbox"/> Agency Credit <input type="checkbox"/> Credit Card <input type="checkbox"/> Others : _____	6.) Name : _____ Email Address : _____ <input type="checkbox"/> Booking and Payment: FOP: <input type="checkbox"/> Agency Credit <input type="checkbox"/> Credit Card <input type="checkbox"/> Others : _____

Account Management Access	
Name : _____ E-mail : _____ <input type="checkbox"/> Account and Finance Management Access <input type="checkbox"/> Account Management Access only <input type="checkbox"/> Finance Management Access only	Name : _____ E-mail : _____ <input type="checkbox"/> Account and Finance Management Access <input type="checkbox"/> Account Management Access only <input type="checkbox"/> Finance Management Access only
Name : _____ E-mail : _____ <input type="checkbox"/> Account and Finance Management Access <input type="checkbox"/> Account Management Access only <input type="checkbox"/> Finance Management Access only	Name : _____ E-mail : _____ <input type="checkbox"/> Account and Finance Management Access <input type="checkbox"/> Account Management Access only <input type="checkbox"/> Finance Management Access only

Group Management Access (GRM)	
Name : _____ Designation : _____ E-mail : _____	Name : _____ Designation : _____ E-mail : _____
<i>Note: Provide unique email address per user. Should have access to booking and payment.</i>	

Reporting Access: Sales Report	
Name : _____ E-mail : _____	Name : _____ E-mail : _____

**Note: The Account shall be responsible for all transactions done by the above assigned person/s.**

Prepared by :

Authorized by:

\_\_\_\_\_  
Signature over Printed Name

\_\_\_\_\_  
Signature over Printed Name / Designation

\_\_\_\_\_  
Signature over Printed Name / Designation

To be filled up by Cebu Pacific only:

Kindly tick box if account is:

- |                               |                               |
|-------------------------------|-------------------------------|
| <input type="checkbox"/> Corp | <input type="checkbox"/> PHIA |
| <input type="checkbox"/> Govt | <input type="checkbox"/> RPSA |
| <input type="checkbox"/> GSA  | <input type="checkbox"/> HKIA |
| <input type="checkbox"/> RGGW | Others _____                  |
| <input type="checkbox"/> WHS  |                               |
| <input type="checkbox"/> PSA  |                               |

Application no. \_\_\_\_\_  
Organization Code \_\_\_\_\_  
Location Code \_\_\_\_\_  
Currency to Use \_\_\_\_\_  
Endorsed by / Date \_\_\_\_\_  
Passenger Sales

Validated: \_\_\_\_\_  
(FM) Date

Registered by \_\_\_\_\_  
(ISD) Signature over printed name/Date