

Virtual Office Telecommunications Set Up Form

Please print this form and complete the below details.

Company Name: _____

Please list contact details for all personnel

Name:	Contact Details	To be given out
	Extension:	Yes/No
	Phone:	Yes/No
Title/Position	Mobile:	Yes/No
	Fax:	Yes/No
	Email:	Yes/No

Name:	Contact Details	To be given out
	Extension:	Yes/No
	Phone:	Yes/No
Title/Position	Mobile:	Yes/No
	Fax:	Yes/No
	Email:	Yes/No

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	Extension:	Yes/No
	Phone:	Yes/No
Title/Position	Mobile:	Yes/No
	Fax:	Yes/No
	Email:	Yes/No

Your Business Overview

Please write a brief description on your business to assist us with your phone calls.

Mail Management

2) Mail

- I require my mail to be redirected to: (please specify if different from above)

- I will collect my mail from reception:

- daily
- weekly
- other _____

- Please notify me that I have received mail via:

- email
- sms

Once complete, please return form via email to
Rachel Jackson, Office Manager
Email : rjackson@officesfirst.com.au