

# AMRYN REFERRAL FORM

## REFER A BUSINESS & EARN £100

Thank you for recommending AMRYN.

For every successful business referral that processes a minimum of **£1,000** in card transactions, you will receive a **£100** reward.

### 1 YOUR DETAILS

#### Referrer Information

Full Name: \_\_\_\_\_  
 Company Name (if applicable): \_\_\_\_\_  
 Telephone Number: \_\_\_\_\_  
 Email Address: \_\_\_\_\_  
 Bank Account Name: \_\_\_\_\_  
 Sort Code: \_\_\_\_\_  
 Account Number: \_\_\_\_\_

### 2 BUSINESS YOU ARE REFERRING

#### Business Information

Business Name: \_\_\_\_\_  
 Contact Name: \_\_\_\_\_  
 Job Title: \_\_\_\_\_  
 Telephone Number: \_\_\_\_\_  
 Email Address: \_\_\_\_\_  
 Business Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Website (if applicable): \_\_\_\_\_

### 6 ADDITIONAL NOTES

Please provide any useful information regarding the business:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

### 3 CURRENT PAYMENT PROVIDER

- |                                   |                                       |
|-----------------------------------|---------------------------------------|
| <input type="checkbox"/> Worldpay | <input type="checkbox"/> Clover       |
| <input type="checkbox"/> Teya     | <input type="checkbox"/> Shift4       |
| <input type="checkbox"/> SumUp    | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Dojo     | <input type="checkbox"/> Unsure       |

### 4 SERVICES OF INTEREST

Please tick all that apply:

- |  |  |
|--|--|
| <input type="checkbox"/> Card Terminals    | <input type="checkbox"/> Payment Gateway |
| <input type="checkbox"/> Merchant Services | <input type="checkbox"/> MID Only        |
| <input type="checkbox"/> EPOS Solutions    |  |

### 5 ESTIMATED MONTHLY CARD TURNOVER

- |  |  |
|--|--|
| <input type="checkbox"/> Under £5,000      | <input type="checkbox"/> £25,000 – £50,000 |
| <input type="checkbox"/> £5,000 – £10,000  | <input type="checkbox"/> £50,000+          |
| <input type="checkbox"/> £10,000 – £25,000 |  |

### 7 CUSTOMER CONSENT

I confirm that I have permission from the referred business and contact to share their information with AMRYN for the purpose of discussing merchant services and payment solutions.

Referrer Signature:

\_\_\_\_\_  
SHOW

Date:

\_\_\_\_\_

### REFERRAL SCHEME TERMS & CONDITIONS

- £100 reward payable per successful referral.
- A referral is deemed successful once the referred business has processed a minimum of £1,000 in card transactions through an AMRYN payment solution.
- The £1,000 threshold must be achieved within 30 days of the merchant account going live.
- Reward payments will be made within 30 days of the qualifying criteria being met.
- Referrals must be new business introductions not already known to or actively engaged with AMRYN.
- Applicants must be aged 18 years or over.
- Identification** may be requested before payment is issued.
- Referrers must** hold a registered UK bank account.
- AMRYN reserves** the right to amend, suspend or withdraw this referral programme at any time.
- This promotion** cannot be used in conjunction with any other offer or promotion.

### SUBMIT YOUR REFERRAL

Email completed forms to:

[info@amryn.co.uk](mailto:info@amryn.co.uk)

*Thank you for recommending AMRYN!*