

# S Badge Order Form



## Details:

Name: \_\_\_\_\_

Address: \_\_\_\_\_



Phone: AH \_\_\_\_\_ BH \_\_\_\_\_ Mob \_\_\_\_\_

Email: \_\_\_\_\_

Club: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

- Purchases are to be:  Collected from the office on **(after 01/01/2010)** \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Sent to the above address – freight charged as shown

| Item   | Unit Quantities | Unit Cost<br>(incl GST) | Total Cost |
|--|-----------------|-------------------------|------------|
|  2009/2010 Competing Swimmer<br>(supplied in unit lots of 25 patches) |                 | \$10.00                 |            |
|  2009/2010 Training Swimmer<br>(supplied in unit lots of 25 patches)  |                 | \$10.00                 |            |
| Postage & Handling   | N/A             | \$2.00                  | \$2.00     |
|  |                 |                         |            |

## Payment Details:

- Cash  Cheque  Credit Card  Invoice Club

Total Payment: \$ \_\_\_\_\_

## Credit Card Details:

Cardholders Name: \_\_\_\_\_

Card Number: \_\_\_\_\_

Type of Card:  Bankcard  MasterCard  Visa Expiry Date: \_\_\_\_/\_\_\_\_

Signature: \_\_\_\_\_

## Invoice Club Authority:

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Club Officer: President / Secretary / Treasurer

Printed Name: \_\_\_\_\_

**Return Fax to Kate Comer**

**(03) 9681 8211**