



DVD package PAYMENT FORM

NAME: _____

ADDRESS: _____

POSTCODE: _____

Contact PHONE NO: _____

EMAIL: _____

PAYMENT DETAILS

PLEASE DEBIT MY: VISA [] MASTERCARD [] FOR THE AMOUNT OF\$ _____

Being for _____x DVD Package 1 @ \$59.95 inc postage in Aus = _____

_____X DVD Package 2 @ \$79.95 inc postage in Aus = _____

TOTAL _____

CARD NO: _____

EXPIRY DATE: _____

NAME ON CARD: _____

SIGNATURE: _____

DATE: _____

PRINT AND FAX or EMAIL TO:

Gillian Rolton
08 8383 6180

BY CHEQUE OR MONEY ORDER TO:

Adelaide Horse Trials Management Inc.
PO Box 201 Happy Valley SA 5159

BY ELECTRONIC FUNDS TRANSFER TO:

Acc. Name: Adelaide Horse Trials Management Inc.
BSB: 065 116
Acc. Number: 10114122

(please include your name on transfer details)

FURTHER ENQUIRIES PLEASE CONTACT:

Event Director: Gillian Rolton
Mob: 0418 825 018 **Ph./ Fax:** 08 8383 6180
Email: ggrolton@bigpond.com

Adelaide Horse Trials Management Inc.
ABN: 76 563 798 242