PAYMENT FOR:

NAME ON CARD	DANCING SCHOOL
CARD NUMBER	
EXP.DATE CCV#	PLEASE LEAVE BLANK IF YOU DO NOT
	PROG @\$25
SIGNATURE OF AUTHORITY	
	ENTRIES \$
PHONE NUMBER	
	TOTAL TO BE CHARGED \$
POSTAL ADDRESS:	

- PLEASE ATTACH CHEQUE OR MONEY ORDER IF YOU DO NOT WISH TO USE CREDIT CARD FACILITIES
- For all CanDance Australia information hit the website www.candanceaustralia.com.au
- PLEASE NOTE all credit card information will be destroyed once payment is authorised.
- Please make sure the best contact number is written.
- FORWARD TO CANDANCE AUSTRALIA PO BOX 8045, PARAFIELD GARDENS, 5107
- ALL OCTOBER ADEL ENTRIES MUST BE BY POST OR BY HAND DUE TO NUMBERS