

PAYMENT FORM

CanDance

AUSTRALIA

PAYMENT FOR:

OCT JULY PROGRAMME / PAYMENT FORM

NAME ON CARD

[Empty box for Name on Card]

DANCING SCHOOL

[Empty box for Dancing School]

CARD NUMBER

[Empty box for Card Number - 4 digits]

[Empty box for Card Number - 4 digits]

[Empty box for Card Number - 4 digits]

[Empty box for Card Number - 4 digits]

EXP.DATE

[Empty box for Exp. Date - 4 digits]

CCV#

[Empty box for CCV# - 3 digits]

PROG @\$20

[Empty box for Prog Amount]

SIGNATURE OF AUTHORITY

[Empty box for Signature of Authority]

ENTRIES \$

[Empty box for Entries Amount]

PHONE NUMBER

[Empty box for Phone Number - 10 digits]

TOTAL TO BE CHARGED \$

[Empty box for Total to be Charged]

POSTAL ADDRESS:

[Empty box for 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**