

BOOKING FORM – 'Creative Delights' Eamonn Vereker Glass Blowing Studio

Please send me _____ tickets at \$55 per person or \$100 per couple including gst.

Title (please circle) Mr Mrs Ms Dr

Name _____

Address _____

Telephone Number (daytime) _____ (mobile) _____

Email address _____

PAYMENT

I wish to pay by cheque:

Enclosed please find my cheque for \$ _____

Made payable to

Minda Incorporated

I wish to pay by credit card : \$ _____

Visa

Mastercard

Name on Card _____

Card Number _____

Signature _____ Expiry Date _____

Please return with payment to :

Minda Incorporated

'Creative Delights'

PO Box 5

Brighton SA 5048

Email: fundraising@minda.asn.au

Fax: 8422 6330

We Can Do It