

Garville Netball Club Inc ABN 76 742 728 964
Payment Authority Form



GARVILLE
NETBALL CLUB
INC
ABN: 76 742 728
964

President:
Nathalie McRae
8344 3832

Secretary:
Fiona Madigan
PO Box 1149
Glenelg South
SA 5045
8295 6249

Club Mobile:
0448 935 254

Date: _____

Player Name: _____ Grade: _____

Home Address: _____

Contact Phone No: _____

<u>Option 1: Credit Card</u> <input type="checkbox"/> (please tick)		
Bankcard <input type="checkbox"/>	Mastercard <input type="checkbox"/>	Visa <input type="checkbox"/>
Card Number:	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Expiry Date:	<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/>	Amount: \$ _____
Cardholder's Name: _____ (As it appears on the Credit Card)		
Signature: _____		

<u>Option 2: Cheque / Money Order</u> <input type="checkbox"/> (please tick)	
Drawer: _____	
Bank / Branch: _____	
Cheque Number: _____	Amount: \$ _____

<u>Option 3: Cash</u> <input type="checkbox"/> (please tick) Amount: \$ _____

<u>Office Use Only</u>	
Receipt No: _____	Date: _____