

KINGSFORD SMITH SUITE BOOKING FORM

Organisation Name: _____

Contact Name & Number: _____

Postal Address: _____

Email: _____

Date of Booking: _____

Times of Booking: _____

Please advise preferred method of payment: CREDIT CARD (PREFERRED) / DIRECT DEPOSIT

CREDIT CARD

I hereby authorise the settlement of all charges to be charged to the following credit card:

Type of card: AMEX VISA Mastercard Credit Card No: _____

Expiry Date: ____/____ CCV Number (last 3 digits at the back of the card): _____

Amount to be charged: _____ (incl GST)

Card Holders Name: _____

Card Holder's Signature: _____

DIRECT DEPOSIT

I hereby confirm that settlement of all charges will be made by direct deposit into the following bank account:

Bank Name: Westpac
Branch Name: 380 New South Head Road
Double Bay
Sydney NSW 2028
Australia
Branch Number: 032 053
Account Name: Event Group Australia Pty Ltd
Account Number: 294 221

Amount deposited: _____

If paying by direct deposit please fax remittance advice to 02 9153 7001 or e-mail to: enquiry@kitchencatering.com.au

I confirm and accept the attached function details as an authorised signatory.

Client's signature _____ Date _____