

CREDIT CARD PAYMENT DETAILS

Date: _____

Stand No: _____

Exhibition: **DECORATION + DESIGN Sydney 2009**

Company: _____

Contact: _____

Tel: _____

Fax: _____

Payment Details

Amount: \$ _____ Invoice No: _____

Charge to: Visa MasterCard
(please circle)

Credit Card No: _____

Expiry Date: _____

Cardholders Name (please print): _____

Cardholders Authorising Signature: _____

PLEASE RETURN BY FAX TO 03 **9654 5596**