

Name:		(Company:		
Mobile:			Email:		
No of Players () Hole Sponsorship: No # Team Names and Handicap					
1	<u>-</u>	3	<u>-</u>		
2		4	<u>-</u>		
Lunch Only	Golf Cart		TOTAL AMOUNT \$		

PAYMENT METHOD



MAIL: Send completed form with payment to: North Adelaide Football Club, PO Box 2048, Prospect SA 5082



PHONE: North Adelaide Football Club (08) 8344-8733



IN PERSON: Bring completed form with payment to: Menzies Crescent, Prospect



FAX: Send renewal with credit card payment details and fax to (08) 8269-7450



DIRECT CREDIT: Pay via direct credit to BSB: 035-050 Account Number: 172-732

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I WOOLD LIKE TO THE DI				
VISA	MasterCard	Cheque/Money		
Direct	Cash			
CREDIT CARD DETAILS				

Card Number	
Expiry	
Cardholder's Name	
Cardholder's Signature	

For more information, please contact Jessamy Lutt on 0419 183 051 or Jessamy.Lutt@nafc.com.au