

Cardholder's Name

6:00pm, Saturday 28 March 2015 'Lighthouse Beach Resort' - Grand Ballroom Carey Street, Bunbury Black Tie/Cocktail

ABN 83 590 927 922

Contact Name:				
Postal Address:				
Phone:				
Corporate Email:				
Bookings are required by Friday 1- s acceptable at no additional cos				n (14) days before the event. A replacement name
Name Company		Email (must be completed for all attend		dees) Dietary Requirements
other organisations to assist it in ma details contained in this form to be u	arketing or other activitions sed by Master Builders o	es. Those organisations may use or other organisations please tick	the information for their own marketin	Master Builders may also pass on the information to g or other purposes. If you do not wish the personal hen Master Builders will consider that the individuals available at www.mbawa.com.
	Paym	nent Details		
Payment Amount				This document will be
No. Tickets Required - members		@\$180 (incl. GST) =		a TAX INVOICE upon payment.
No. Tickets Required - non members		@\$255 (incl. GST) =		Please forward onto your
Tables of 10 - members		@\$1700 (incl. GST) =		ACCOUNTS DEPARTMENT
Tables of 10 - non members		@\$2500 (incl. GST) =		
Total amount payable: Payment Method (Plea	ase tick)		\$	MASTER BUILDERS SOUTH WEST
☐ Cheque (made payable to Master Builders)				PO Box 253
_	Acc: 0399115		any name] Pls email/fax remit.	BUNBURY WA 6231
☐ Credit Card	Mastercard	Visa 🗆		Р 08 9726 0939 F 08 9726 0949
rd NumberExpiry Date			E southwest@mbawa.com	

Sign.