

Pullenvale State School Chaplaincy Dinner

Credit Card Payment

What the payment is for: _____

Number of tickets being purchased @\$35 each _____

Total Payment amount: _____

Please circle which card: visa mastercard

Card number:

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Expiry date: _____ / _____ ccv number:

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Cardholder's name: _____

Cardholder's signature: _____

Direct Debit

Pullenvale State School General Account

BSB: 064 152 Account number: 00090190

Please provide the following reference:

(surname LCC dinner ie Dwyer LCC dinner).

Please allow 3 days for the payment to go through.

Payment must be made by Monday 17th July.