

# SHOP order form

## ONE Personal details for receipt

Title  First name

Surname

Company

Address

State

Postcode

Country

Phone

Home  Work  Mobile (Please Tick)

Email

## TWO Choose the item you wish to purchase (please write the quantity in the first column)

QTY	Description		Amount
<input type="text"/>	25 Years: History of the Woolcock Institute of Medical Research	\$30.00 (plus \$7 postage)	<input type="text"/>
<input type="text"/>	Woolcock Bookmark	\$4.95 (plus \$1 postage)	<input type="text"/>
<input type="text"/>	Woolcock Lapel Pin	\$4.95 (plus \$1 postage)	<input type="text"/>
<input type="text"/>	Ladies Polo Shirt (please circle size) 10 12 14 16	\$22.00 (plus \$10 postage)	<input type="text"/>
<input type="text"/>	Men's Polo Shirt (please circle size) S M L XL XXL	\$22.00 (plus \$10 postage)	<input type="text"/>
<input type="text"/>	Ladies Polar Fleece Jacket (please circle size) S M L XL	\$44.00 (plus \$10 postage)	<input type="text"/>
<input type="text"/>	Men's Polar Fleece Jacket (please circle size) S M L	\$44.00 (plus \$10 postage)	<input type="text"/>

## THREE Payment details

Total \$

Credit Card, please debit my:

Visa  Bankcard  Mastercard  Amex

Card No

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Amex ID Number

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Expiry Date

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Name on Card

Signature

Cheque, made payable to the Woolcock Institute of Medical Research, is enclosed.

Cash

## FOUR Send payment

Please enclose this form with your cheque or money order and post it to:

Woolcock Institute of Medical Research, Reply Paid 77, Missenden Rd, NSW, 2050

Credit card payments can be made by phone or fax

Phone 02 9351 0900 Fax 02 9351 0914

Please add me to the Woolcock fundraising mailing list to receive breathless and .

Donations to the Woolcock Institute of Medical Research over \$2 are tax-deductible.

Thank you for your support.