

QLD STATE TRAINING SQUAD

TENPIN BOWLING ASSOCIATION OF QUEENSLAND

Payment Form

Athletes Name: _____ Date: ____ / ____ / 11

State Training Squad (circle) : March / July / October

- Cash Cheque
 Credit Card* Invoice
 Electronic Funds Transfer

*Please note a 5% Credit surcharge applies

Electronic Funds Transfer—

Please Note: Please reference your name and "QSTS" (plus month of event) on the Transfer so we know who it is from and then we are able to send a receipt of payment with the registration card.

Account Name: Tenpin Bowling Association of QLD Inc.

Bank: Bank of Queensland

Account No: 10-261021

BSB: 124 001

Credit Card: Mastercard Visacard (please circle)

Card Number:

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Cardholder's name:

.....

Card exp: ____/____

Amount \$ _____

Plus 5% surcharge (Credit card) \$ _____

(Credit card surcharge to cover bank fees & charges)

TOTAL \$ _____

Cardholder's signature:

Date: ____/____/____

I require an official receipt (Receipts will be e-mailed to you)

E-Mail: _____



MAJOR SPONSORS



Mail to: Tenpin Bowling Association of Queensland inc.
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Milton QLD 4064

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