



B A L L A R A T

PATCHWORK

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ORDER FORM

Print out this form via your printer, complete the details and post or fax to the address above.

*Please add me to your email list to receive class information and monthly specials. YES NO

Fabric Club Membership # ----- email address: -----

SURNAME: -----

FIRST NAME: -----

ADDRESS: -----

TOWN/CITY: -----

STATE: -----

POSTCODE: -----

HOME PHONE: -----

BUSINESS/MOBILE: -----

METHOD OF PAYMENT [PLEASE CIRCLE]

MASTERCARD VISA BANKCARD CHEQUE MONEY ORDER

CARD No. -----

EXPIRY DATE: -----

NAME OF CARD HOLDER: -----

SIGNATURE: -----

Postage: We will ring you to confirm the cost of postage after weight has been determined.

Item Description and Size <input type="checkbox"/>	COST <input type="checkbox"/>	Quantity/Metres <input type="checkbox"/>	TOTAL
Code:			
Code:			
Code:			
Code:			
Code:			
Code:			
Code:			

SubTotal

Postage

TOTAL

ALL PRICES INCLUDE GST