

Reply Form for TCF Dinner

Name: _____

Address: _____

Contact phone no: _____

Dietary requirements: _____

Names of other people I will be bringing:

Total number attending at \$35 per head: _____

Payment by:

Cheque enclosed, made payable to TCF of NSW.

Direct deposit to Westpac Bank BSB: 032-373 Account: 128812

(Please put your name as the reference).

Mastercard / Visa (circle which one)

Card No _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _

Expiry date: _____ / _____ Print name on card: _____

Signature: _____

Copy and email to or print and post to:

TCFNSW

PO Box 3813 Marsfield NSW 2122

Ph 0490 148 249.

Email: tcfofnsw@exemail.com.au

Web www.tcfofnsw.org.au