



ORDER FORM

When completed, please return to **The Christmas Shop, PO Box 464, SOUTH HURSTVILLE NSW 2221**

www.thechristmasshop.com.au

Tel : 02 9529 2512

Fax : 02 9529 2500

Item Code	Item Description	Cost	QTY	TOTAL
TOTAL COST >>				

We appreciate your order - thank you

YOUR DETAILS

Name : Customer No : Daytime Phone : ()

Address : Postcode :

I wish to collect my items
Please allow **at least one week** from receipt of order

Kindly mail to the address above
* Australia Post rates apply - charges will depend on items selected and postcode. Please authorise below or confirm by phone.

I wish to pay \$ (total from above) by

cheque / money order made payable to **The Christmas Shop** (include postage/handling)

Visa Mastercard Bankcard American Express Savings

Card No : Expiry Date : /
Verification Code :

I hereby authorise postage/handling charges also to be debited to my credit card

Signature : Date : 11/08