The Christmas Shop

ORDER FORM

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

www.thechristmasshop.com.au **email : christmasmagic@bigpond.com** **Telephone : 02 9529 2512**

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 : ....…..…….....

08/17