

# LOCAL SUNSCREEN FUNDRAISER

with [sunsationalbodycare.com.au](http://sunsationalbodycare.com.au)

PO Box 119 Kensington, NSW 1465 AUSTRALIA  
 Direct Lines: Telephone: (02) 9664 1412 Fax: (02) 9664 4212

## CORPORATE/SCHOOL or GROUP ORDER FORM TO SUPPLIER

Club/School:			
Address:			
	Suburb:	State:	Postcode:
Contact Name:			
Phone:	Mobile:		
Fax:	Email:		
Date:	Signature:		

Order Product	Qty:				
Sunscreen 100mL:	_____	x	@\$ _____	= \$ _____	(No GST required)
Sunscreen 20mL:	_____	x	@\$ _____	= \$ _____	(No GST required)
After sun 125mL:	_____	x	@\$ _____	= \$ _____	(10% GST inclusive)
<b>Subtotal \$ to send Sunsational Body Care/Sunscreen</b>				= \$ _____	
Plus Delivery				= \$ _____	
<b>TOTAL</b>				= \$ _____	

\* When do you require delivery: Date: \_\_\_\_\_ \*\*We will phone you before delivering goods

Delivery Address:			
	Suburb:	State:	Postcode:
	Nearest Cross Street:		
Who is Responsible for delivery/Name:	Signature:		
Phone:	Mobile:		
Fax:	Email:		

### Direct Deposit into:

Bank: National Australia Bank  
 Branch No: 082 – 360  
 Account Name: CCSD  
 Account No: 45318 – 6389

### Credit card: Visa or Master card Only (please circle)

Name on card: \_\_\_\_\_  
 Card No: \_\_\_\_\_  
 Expiry Date: \_\_\_\_ / \_\_\_\_ Number on back of card: \_\_\_\_\_  
 Card holder's signature: \_\_\_\_\_

Please Phone/Email my friend about Sunsational: - \_\_\_\_\_

Office Use Only: Date Received: \_\_\_\_\_ Order No: \_\_\_\_\_  
 Courier Used: \_\_\_\_\_ Or Pick Up \_\_\_\_\_  
 Follow Up Call \_\_\_\_\_ Happy ☺ or ☹



☀ AUSTRALIAN MADE & OWNED ☀  
**SUNSATONAL 3in1 PREMIUM SUNSCREEN & BODY CARE RANGE**

