

2017 CLIPSAL 500 | RYMILL HOUSE

KALI HUNTER ENTERPRISES PTY LTD

ACN 106 733 546 ABN 18 106 733 546

Upon full payment, this form is your TAX INVOICE.
All prices quoted on this form are exclusive of GST.
PLEASE RETAIN THIS FORM FOR YOUR RECORDS.



Please return this booking form no later than 10 February 2017
Forwarded on availability from SA Tourism and upon full payment.

Kali Hunter Enterprises Pty Ltd

Telephone 0409 696 446

Facsimile + 61 8 8223 4880

Email kali@kalihunter.com.au

www.clipsal500atrymillhouse.com.au

www.kalihunter.com.au

www.rymillhouse.com.au

BOOKING FORM

Booking Contact Company

Address

Telephone Facsimile Mobile

Email

GUEST PACKAGE	PRICE (EX GST)	GST	QTY	TOTAL \$
FOUR DAY GUEST PACKAGE REF: CLFOURD17 2-5 MARCH 2017	Individual \$2,400 \$350 discount			
	Table of 10 \$24,000 \$3,500 discount			
THURSDAY RACE DAY REF: CLTHUR17 2 MARCH 2017	Individual \$600			
	Table of 10 \$6,000			
TEAMKIDS EASTER APPEAL REF: CLFRI17 2 MARCH 2017	SOLD OUT			
FRIDAY RACE DAY REF: CLFRI17 3 MARCH 2017	Individual \$650			
	Table of 10 \$6,500			
FRIDAY CORPORATE FUND RACER LUNCHEON (12PM - 3PM) REF: CLFRI17 3 MARCH 2017	Individual \$270			
	Table of 10 \$2,700			
SATURDAY RACE DAY REF: CLSAT17 4 MARCH 2017	Individual \$725			
	Table of 10 \$7,250			
SUNDAY RACE DAY REF: CLSUN17 5 MARCH 2017	Individual \$775			
	Table of 10 \$7,750			
		TOTAL COST \$		

GUEST DETAILS			
1	Name		Company
	Email		Event
2	Name		Company
	Email		Event
3	Name		Company
	Email		Event
4	Name		Company
	Email		Event
5	Name		Company
	Email		Event

PAYMENT DETAILS *PAYMENT BY CREDIT CARD INCURS A SURCHARGE OF 2%

Credit Card Payment* Cheque EFT Mastercard Visa

Card No / Expiry / CCV

Amount \$

CARD HOLDER NAME SIGNATURE

CHEQUE PAYABLE
Kali Hunter Enterprises Pty Ltd
 100 East Terrace Adelaide SA 5000
 P.O. Box 2510 Kent Town 5071
 Contact: Kali Hunter By Mobile: 0409 696 446
 By Email: kali@kalihunter.com.au By Fax: 08 8223 4880

EFT PAYMENT
Kali Hunter Enterprises Pty Ltd
 BSB: 015-010 A/C No: 1077-15743
 Please quote: Ref Event
 (specified code in table) and
 your individual/company name

DISCLAIMER We may use the personal details of individuals and/or company names in this form for communication, invitations to events, fundraising, networking, publications, advocacy, research, or otherwise. We may also pass on individual and/or company names to other organisations. If you do not wish the personal details contained in this form to be used by us or other organisations please tick this box: If you do not tick the box, then we will consider that the individuals completing this form consent to their personal details being used in the manner indicated.

TERMS AND CONDITIONS Payment of 20% of the Total Cost (the "deposit") is required on booking and return of this form. Full payment and deduction of the Total Cost is authorised by return of this form and is due no later than Saturday 10 February 2017. Bookings cannot be altered once submitted. Guest passes will be forwarded on availability from the SA Tourism Board and upon full payment. No refunds will be given under any circumstances. Booking fees and credit card changes apply to credit card payments. We reserve the right to alter the event program, event offerings, hospitality features, hospitality suite, guest packages, menu and beverage items, gates open and close times and bar open and close times and to cancel the event in its entirety.

CONFIRMATION AND ACCEPTANCE

SIGNATURE NAME (PRINT) DATE