

MERCHANDISE ORDER FORM

MEMBER INFORMATION			
Full Name: _____	Mobile Number: _____		
Current Address: _____			
City: _____	State: _____	Postcode: _____	
E-Mail Address: _____			



Short Sleeve Polo: \$30
 Long Sleeve Polo: \$35
 Saddle Blankets: \$35
 Cap: \$20

ITEM	SIZE	QTY	\$
Short Sleeve Shirt	10		\$
	12		\$
	14		\$
	16		\$
	1		\$
Long Sleeve Shirt	SM		\$
	MED		\$
	LARGE		\$
Cap	1 Size		\$
Saddle Cloth	RED		\$
	WHITE		\$
TOTAL DUE:			\$

Goods can be collected by arrangement at time of ordering.

PAYMENT DETAILS			
Account Name:	MURRAY ADULT RIDERS ASSOCIATION Inc	BSB:	633 000
Reference Details:	'LAST NAME' & 'MERCHANDISE'	Account Number:	150 174 795
Email Forms To:	murrayadultriders@hotmail.com		

ACKNOWLEDGEMENT	
<i>I hereby confirm that I wish to place an order for merchandise to the Murray Adult Riders Association Inc. and agree to pay for goods ordered as specified above.</i>	
Signature of Applicant: _____	Date: _____
Parent/Guardian Consent (for under 18): _____	Date: _____