

# Booking Form

*An Evening with  
Samuel Johnson*

Name:.....

Postal Address:.....

State:..... Postcode:.....

Contact Number:..... Number of Tickets:.....

Email:.....

Title:..... Full Name:..... DR:.....

Title:..... Full Name:..... DR:.....

Title:..... Full Name:..... DR:.....

Title:..... Full Name:..... DR:.....

Title:..... Full Name:..... DR:.....

Title:..... Full Name:..... DR:.....

Title:..... Full Name:..... DR:.....

Title:..... Full Name:..... DR:.....

\*DR: Dietary requirements

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### TICKETS

\$250

Tables of eight available

### RSVP 15 JANUARY 2018

### PAYMENT OPTIONS

- Cheque made payable to the Australia Day Council NT
- Cash please call 08 8989 5290 to arrange payment

### BANK TRANSFER

Account name: Australia Day Council NT

**BSB:** 065 901

**ACCOUNT NUMBER:** 1094 2966

**REFERENCE:** Please use your surname

### CREDIT CARD

Mastercard/Visa

Expiry Date:.....

Card Number:.....

CCV:.....

Amount: \$.....

### RETURN TO

**Australia Day Council NT**

GPO Box 1934, Darwin NT 0801

office@adcnt.org.au

08 8989 5290