



2016 Herefords Australia Wall Calendar Advertising Request

Please Note: This form must be returned by the 31st of October 2016

Member Number: _____

Contact Name: _____

Phone Number: _____ Mobile Number: _____

Contact Email: _____

As the booking for advertising is 'first in, best dressed' please circle your preferences for which month you would like to advertise on below.

1st Preference: Jan Feb Mar Apr May June July Aug Sept Oct Nov Dec

2nd Preference: Jan Feb Mar Apr May June July Aug Sept Oct Nov Dec

3rd Preference: Jan Feb Mar Apr May June July Aug Sept Oct Nov Dec

Tessa Frew will contact you regarding which of the above preferences are available and then will discuss plans for your artwork and the information to be displayed in your advertisement.

If you have any queries or concerns please contact Tessa Frew at the office on (02) 6772 1399 or via email to tfrew@herefordsaustralia.com.au

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PAYMENT METHOD

Visa MasterCard EFT (Ref: Membership Number)

Card No: _____ Expiry Date: ____/____ CVC: _____

Name on Card (print): _____

Signature: _____