



# Special Olympics South Australia

## Merchandise Order Form

All profits go directly into helping athletes achieve their sporting goals

### Special Olympics 21st Birthday Commemorative drinking glasses

\$5 each or 6 for \$20

\*The actual glass also has 'Celebrating 21 Years' Written underneath the logo.

\*\* Postage fee is not applicable if you pick up your package from the office



\* FOR VISUAL PURPOSES ONLY \*

Item	Price	Qty	Total
1 Glass	\$5		
6 Glasses	\$20		
**Postage	\$5		
Subtotal			\$

### 2013 Desk Calendars

Re-live 2012 events while viewing 2013!

Only \$5 each + \$2 Postage

Over 100 athletes and volunteers featured in the calendar pictures.

\*\* Postage fee is not applicable if you pick up your package from the office

July 2013



Item	Price	Qty	Total
1 calendar	\$5		
**Postage	\$2 per calendar		
Subtotal			\$

### 21st Birthday and 2012 Awards Night Photos

To view the photos visit:

- [www.specialolympics.com.au/sa](http://www.specialolympics.com.au/sa)
- Click on 'Photo Galley' in the side bar
- Click on the folder that says 'SA 21st Birthday Party'
- Browse the photos and record the 'order number' (bottom left of photo) of the photos you wish to purchase

- Photos are \$20 each
- If you don't have access to the internet to view the photos, please contact the office to make other arrangements
- Photos size— 10 X 8 Inches



Order Number	Qty	Total
		\$20 Per photo
Subtotal		\$



# Special Olympics

South Australia

Name \_\_\_\_\_

Contact Number \_\_\_\_\_

Email Address \_\_\_\_\_

Postal Address \_\_\_\_\_

Suburb \_\_\_\_\_ Postcode \_\_\_\_\_

Item	Total Amount
Commemorative Glasses	
Desk Calendar	
Photos	
Final Total Owed \$	

## Payment Options

### SOSA Merchandise

I have enclosed my **cheque/money order**

(made payable to:  
Special Olympics Australia – South Australia).

**EFT Payment**

Amount paid: \_\_\_\_\_

Date transferred: \_\_\_\_\_

BSB: 032078

Account Number: 534631

Account Name: Special Olympics Australia - SA

Reference: SA Merchandise

**Please debit my:**

Visa

MasterCard

Credit Card Number: \_\_\_\_/\_\_\_\_/\_\_\_\_/\_\_\_\_

Amount to be debited: \_\_\_\_\_

Name on Card: \_\_\_\_\_

Exp Date: \_\_\_\_\_ CCV number \_\_\_\_\_

Signature: \_\_\_\_\_

Please return to: Special Olympics SA  
Level 1, Building 4  
32-56 Sir Donald Bradman Drive  
Mile End SA 5031