

BOOKING FORM

*Lockheed Martin* VERNON PARKER ORATION & DINNER – Wednesday, 5 June 2019
to be held at the Hotel Realm, National Circuit, Barton ACT 2600

The following people will be attending the Vernon Parker Dinner Oration:

(Please circle the relevant options)

|  |  |  |  |
| --- | --- | --- | --- |
| Name (*PLEASE PRINT*) | Dinner Oration ANI Member  | Dinner OrationANI Non-member  | Dinner OrationPLUS ANI Membership to 30.06.20 |
|  | $110.00 | $135.00 | **$195.00** |
|  | $110.00 | $135.00 | **$195.00** |
|  | $110.00 | $135.00 | **$195.00** |
|  | $110.00 | $135.00 | **$195.00** |
| TOTALS | $............... | $............... | $.............. |

SEATING PREFERENCE (if any): The following people would like to sit at the same table:

CONTACT DETAILS: This booking can be confirmed using this email address (preferred) or phone no:

DIETARY REQUIREMENTS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PAYMENT DETAILS

1. Bookings and payment can be made through **StickyTickets** at: <https://www.stickytickets.com.au/84628>
2. ⬜ EFT: Payment of $……………............... has been made by direct deposit to:

 Bank: Australian Military Bank A/c Name: Australian Naval Institute BSB: 642 170 A/c no. 100081488

 (please use your initial and last name as the reference for the payment)

1. ⬜ Credit Card: Please charge $…………………………………..... to my [ ] MasterCard [ ]  Visa

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Card No.  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

 Name Shown on card:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [PLEASE PRINT]

 Signature: Expiry date: CVV: \_\_\_\_\_\_\_\_\_\_\_\_\_

***NOTE: Credit card payments will be processed through the ANI Secretariat merchant facilities in the name of Commerce Management Services***

**4. ⬜** Please find enclosed my **cheque** for $………………………. payable to **AUSTRALIAN NAVAL INSTITUTE**

**PLEASE RETURN THIS FORM BY EMAIL, POST, OR FAX TO THE ANI**

Email: admin@navalinstitute.com.au

PO Box 241 Deakin West ACT 2600Australia

Tel + 61 (0) 2 6290 1505Fax + 61 (0) 2 6290 1580