

Western Bulldogs 2012 COTERIE APPLICATION FORM

ABN 68 005 226 595

Coterie Enquiries: Mon–Fri (9am to 5pm)
Phone: (03) 9680 6302
Email: coteries@westernbulldogs.com.au
Web: www.westernbulldogs.com.au



PERSONAL DETAILS:

First Name		Surname		D.O.B	D	D	M	M	Y	Y	
Address				Suburb		Postcode					
Company											
Email											
Mobile phone		Work phone		Membership Number							
Additional Members	1.		Membership Number		D.O.B	D	D	M	M	Y	Y
	2.		Membership Number		D.O.B	D	D	M	M	Y	Y
	3.		Membership Number		D.O.B	D	D	M	M	Y	Y

PACKAGE OPTIONS:

Top Dogs Package – **\$1,750** Player Sponsors Package – **\$3,250** Westerners Package – **\$5,700**

Changes to Standard Package _____

HOW TO PAY:

To pay for your package simply fill in the payment details below and sign in the area provided to acknowledge you agree to the Terms & Conditions of the coterie package you are purchasing. Once complete please return the form via:

Attn: Chris Baba, Western Bulldogs
PO Box 4112 DC, Footscray West, VIC 3012

coteries@westernbulldogs.com.au

(03) 9680 6103

PAYMENT DETAILS:

Amount		<input type="checkbox"/> BULLDOG FOR LIFE – UPFRONT PAYMENT PLAN	<input type="checkbox"/> BULLDOG FOR LIFE – MONTHLY PAYMENT PLAN	<input type="checkbox"/> PAY IN FULL NOW								
Payment Type:	<input type="checkbox"/> Visa <input type="checkbox"/> Mastercard <input type="checkbox"/> Cash <input type="checkbox"/> Cheque (Payable to: Western Bulldogs) <input type="checkbox"/> BPAY <input type="checkbox"/> AMEX (3% surcharge)											
Card Number		Expiry Date	M	M	Y	Y	Date Signed					
Cardholder's Name		Cardholder's Signature					D	D	M	M	Y	Y
By signing this form I agree to the Coterie Terms and Conditions												
Name		Signature					Date					
												Tax invoice required <input type="checkbox"/>

OFFICE USE ONLY

Received ___/___/___ FM SF FD
Signed: _____ Date: ___/___/___ Date: ___/___/___
Signed: _____ Signed: _____

