

BOOKING FORM
Alexz Wigg Summer Master Class 2015

Participant Name: _____

Address: _____

Phone: _____

Email: _____

Session:

1. Full Day \$900.00 Quantity: _____

If not participating on you own, please supply names of other riders coming with you – up to 5 in total.

2. Participate In Group of 6, Full Day \$150.00 Quantity: _____

3. Participate In Group of 6, Morning only \$85.00 Quantity: _____

4. Participate In Group of 6, Afternoon only \$85.00 Quantity: _____

Total Payable: _____

One third deposit is required.

Deposit Payable: _____

Preferred Date: _____ Time: _____

Location: _____

Please pay via bank transfer and include your surname and AW as the reference letters.

Bank Details:

BSB: 013 671

ACC No: 211640083

Name: PL & GL Whittle