

# BABY CLASSES & ORDER FORM

www.jumbosplayland.com.au / admin@jumbosplayland.com.au / 17 Merrigal Road / PO Box 5628 / Port Macquarie NSW 2444 / Phone: 65 810909



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

Parent First Name : \_\_\_\_\_ Parent Surname : \_\_\_\_\_

Please complete details of children attending Jumbos Classes:

Child 1 Full Name: \_\_\_\_\_ (M/F) DOB: \_\_\_\_\_

Child 2 Full Name: \_\_\_\_\_ (M/F) DOB: \_\_\_\_\_

Child 3 Full Name: \_\_\_\_\_ (M/F) DOB: \_\_\_\_\_

E-mail: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Address: \_\_\_\_\_

Suburb: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

Item/Class	Preferred Date	Price	Qty	Total Cost
TOTAL \$				

FREIGHT CHARGE (if applicable): If you are not sure of freight charges leave blank and we will confirm with you) \$

## PAYMENT OPTIONS

CASH/ EFTPOS

CHEQUE:

Made Payable to Jumbos Playland

DIRECT DEPOSIT

Account Details: 'Jumbos Playland Pty Ltd' BSB :082-798 Acc. 55766 -9748

CREDIT CARD Mastercard/Visa

Number: \_\_\_\_\_ Expiry: \_\_\_\_\_ CSC: \_\_\_\_\_

Please allow 5 - 7 working days from receipt of your order & payment.  
Please fax completed form to: **Jumbos Playland, Fax: 02 65810908**

Yes, please add me as a Jumbos Baby Club Member

Yes, please add me to eNews to receive newsletters from Jumbos Playland