



Special Olympics
Sydney Upper North Shore

Athlete Name _____

Sport Fees for Terms 1 & 2, 2012

Invoice Number 01

Sport	Term 1	Term 2	Total Owing (\$)
Basketball	30	30	
Cricket	30	N/A	
Dance	30	30	
Golf	30	30	
Gymnastics	30	30	
Soccer	30	30	
Softball	30	30	
Swimming	30	30	
Tennis	30	30	
Tenpin Bowling	30	30	
2012 Registration Fee			70
Total Owing (\$)			

Cheque/Money Order for \$..... attached or,

Please charge my credit card for the amount of \$.....

Card Type: Visa MasterCard Bankcard

Card No:.....

Expiry Date:.....

Cardholder's Name:.....

Cardholder's Signature.....

Funds Transfer: St George Bank BSB 332018 Account No.552924519

(Ensure athletes name noted on transfer)

Please return to: Secretary, Special Olympics Sydney Upper North Shore, PO Box 262 , Mona Vale NSW 2103

Postal: PO Box 262, Mona Vale NSW 2103

www.souppernorthshore.com

www.specialolympics.com.au

ABN 28 050 738 728

Special Olympics Athletes Oath: - "Let me win. But if I cannot win, let me be brave in the attempt"