

“SeeMe” Bicycle Safety Reflector Kit Order Form

ORDER DETAILS:

Please supply “SeeMe” Bicycle Safety Reflector Kits as follows:

- ◆ _____ of “Individual Reflector Kit” (one Reflector Card with 8 peel-off segments and installation instructions) @ \$ 25.00 each \$ _____
 - ◆ _____ of “Family Reflector 5 Pack” @ \$ 100.00 each \$ _____
 - ◆ _____ of “Bulk 100 Kit Fund Raising Pack” @ \$ 1,800.00 each \$ _____
- Total to Pay \$ _____

Note: All prices include GST and Postage.

DISPATCH DETAILS: (please print clearly)

Purchaser Name _____

Email Address _____

Contact Phone number _____

Address : Where Order to be sent: _____

_____ State _____ Post Code _____

Overseas Buyers: Please add your Country _____

PAYMENT DETAILS:

NOTE: Orders will not be processed until the payments have been cleared by our Bank.

1 Electronic Funds Transfer (Direct Bank Payment) details:

Pay into Account Name: “ SeeMe Reflectors”

BSB No 083-789 Account Number: 23973-1032

Payment Reference Name _____ Initials _____

NOTE Please include your name and initials as the description so that we can clearly identify your order payment.
Purchases with no clear reference details cannot be completed.

2 Credit Card

Card type: (Circle as Appropriate) Mastercard : Visa

Name on Card: _____ Card Number: _____

Expiry Date: _____ CSV Security Number (on back) _____

Signature _____

Then Send or Email this order to seemereflectors@gmail.com or the address below.

3 Cheque payment

Complete a copy of this form and send it, together with a cheque made payable to “SeeMe Reflectors” for the purchase amount to:

SeeMe Reflectors
PO Box 5204
SOUTH FRANKSTON
VICTORIA 3199

Thank you for participating in this Road Safety Campaign. By doing so you will be benefiting yourself and all other road users at night and be helping to generally improve Bicycle Safety on our roads. So Thank You.