

# THE HANDS-ON EXPO

## BOOKING FORM

### PRE-PURCHASE TICKET FORM

#### Your Details:

Title First Name Surname

Address

Suburb State Postcode

Phone Mobile

Email

Which Show (please tick **one**):

- BRISBANE November 13-15, 2009  
 MELBOURNE February 26-28, 2010  
 SYDNEY March 19-21, 2010

No. of Tickets Required:

Adult 1 Day Pass x \$15 each = Total \$

Concession 1 Day Pass x \$13 each = Total \$

2 Day Pass x \$20 each = Total \$

3 Day Pass x \$25 each = Total \$

Total Payment \$

#### Credit Card Payments

- VISA  Bankcard  MasterCard

Card Number:

Expiry Date:   /   Security Code:

Cardholders Name: Signature:

#### PLEASE RETURN

By post, email or fax to:

**IMPACT EXHIBITIONS**  
PO Box 983 Leichhardt  
New South Wales 2040  
F 02 9572 9642  
E accounts@handsonexpo.com.au

**DIRECT DEPOSIT DETAILS**  
Impact Exhibitions Pty Limited  
BSB 012-291  
ACCOUNT NUMBER 2532-60214  
CHEQUES PAYABLE TO Impact Exhibitions Pty Ltd

