## RESERVATION FORM AND TAX INVOICE





HOBART INTERNATIONAL 2018 PREMIUM TICKETING & HOSPITALITY																		
		PREMIUM SEATING (8 PER BOX)				PREMIUM DINING			IN SEAT DINING				IN SEAT ESKY					
DAY & SESSION			GOLD	SILVER	BRONZE	SUB TOTAL	NO. OF GUESTS	PRICE (EACH)	PRICE (TABLE)	SUB TOTAL	NO. OF GUESTS	SANDWICH \$23.10	HOT FOOD \$27.50	PLATTER \$34.10	SUB TOTAL	PREMIUM \$361.90	STANDARD \$251.90	TOTAL \$
SUN	7-Jan	DAY	ALL \$3,514.50	ALL \$2,634.50	ALL \$1,864.50			\$64.90	\$471.90									
MON	8-Jan	DAY						\$64.90	\$471.90									
TUES	9-Jan	DAY		No.	No.			\$64.90	\$471.90									
WED	10-Jan	DAY	No.: Box/Boxes	No.: Box/Boxes	No.: Box/Boxes			\$64.90	\$471.90									
		NIGHT		,	,			\$64.90	\$471.90									
THUR	11-Jan	DAY			513141 5			\$64.90	\$471.90									
		NIGHT	FINAL 5 \$3.184.50	FINAL 5 \$2,194.50	FINAL 5 \$1.534.50			\$64.90	\$471.90									
FRI	12-Jan	DAY	70,20				\$64.90	\$471.90										
		TWILIGHT	No.:	_ No.: es Box/Boxes			\$64.90	\$471.90										
SAT	13-Jan	DAY	BOX/BOXES					\$64.90	\$471.90									
* All prices are inclusive of GST.																		

## ACCEPTANCE

On behalf of the Client, I confirm I have read, understood and accept:

- the Hobart International Premium Ticketing Conditions at www.hobartinternational.com.au/ tickets/premium-ticketing; and
- the Ticket Conditions of Sale and Entry at http://www.hobartinternational.com.au/tickets/ conditions-of-sale-entry

Signature	Date					
CONTACT DETAILS						
Client name:						
Contact name and title:						
Accounts contact name and title:						
Phone:	Fax:					
Mobile:	Industry:					
** All guests in the corporate box will be able to purchase on account to be charged back to this acc	ount holder, unless otherwise advised **					
Email:						
Postal Address:						
Ticket delivery address* (only within Australia):						
* Ticket packages delivered via courier require a street address for a representative to accept and sign for the package during business hours.						

METHOD OF PAYMENT: if paying by cl	h	
IVIL I I I O O O I FA I IVIL IVI I . IT paying by ci	neque please make pavable to Tennis A	ustralla

Mastercard^	☐ Visa^	EFT*	Cheque**
-------------	---------	------	----------

- ^ An administration fee of 1.485% is applicable for all
- EFT details: Account name Tennis Australia Limited, BSB: 013 006, ANZ account #: 836472796 388 Collins St, Melbourne 3000. Send remittance advice via e-mail to HIHospitality@tennis.com.au
- \*\* Make cheques payable to Tennis Australia Ltd

## **CREDIT CARD DETAILS:**

Cardholder name:

Card number: Expiry date: CVC Code:

## Tickets are only confirmed upon receipt of full payment.

\* Tennis Australia Limited ABN 61 006 281 125. GSTR2000/17 paragraph 26 - this document will be an official tax invoice for GST when payment made. Please note premium hospitality bookings are available for both corporate clients and groups of individuals.

Please send to: **Hobart International** GPO Box 115 Hobart TAS 7001 T: +61 3 6108 8200 E: HIHospitality@tennis.com.au

Privacy Statement: Tennis Australia requires the information requested on this reservation form to provide you with official Hobart International Premium Hospitality Package tickets and benefits and related purposes which can be reasonably expected including Tennis Australia / Australian Open Series promotional material. You will be able to access your personal information through Tennis Australia upon reasonable notice.

Please tick this box if you do not wish to receive additional promotional material.

CORPORATE CONDITIONS OF SALE AND ENTRY AVAILABLE HERE: http://www.hobartinternational.com.au/tickets/corporate-hospitality