

**PAYMENT OPTION FORM**

**PIE DRIVE 2020**

Payment options: Please tick payment option being used for your order.

EFT

Cash

Cheque

Credit card

**□** **EFT** – BSB: 633-000 Account number: 162 560 007

Name: Geelong Region Cancerians

Essential to note in Description: Pie Drive/Surname

**□** **CASH** – Deposited in Geelong Region Cancerians bank account as per above EFT at any branch of the Bendigo Bank.

Essential to note in Description: Pie Drive/Surname

**□ CHEQUE** – Cheque payee Geelong Region Cancerians

**□** **CREDIT CARD** - VISA MASTERCARD

Credit Card No: \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_

Exp. Date: \_\_\_\_/\_\_\_\_ CCV: \_\_ \_\_ \_\_ (on back of credit card)

Card holder name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please PRINT

Authorised credit card payment: $\_\_\_\_\_\_\_\_\_\_\_\_\_

Card holder signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Essential to return this Payment Option Form with Pie Drive Order Form and Collection & Delivery Form please**

**If making a Donation only, please note on Order Form and return payment and order form – thank you**