



## CREDIT CARD PAYMENT

Name/s: \_\_\_\_\_

\_\_\_\_\_

Travel Description: \_\_\_\_\_

\_\_\_\_\_

Tour Group \_\_\_\_\_

\_\_\_\_\_

### PAYMENT METHOD

*Please be advised that due to Bank Merchant Charges a 2% Surcharge will be placed on Credit Card Payments.*

Visa       Mastercard

Card Expiry Date \_\_\_\_\_

Card Number \_\_\_\_\_

Name on Card \_\_\_\_\_ Payment Amount \_\_\_\_\_

Signed \_\_\_\_\_

**Return Credit Card Payment Form to:**  
Horizons Sporting Events Pty Ltd  
PO Box 408, Sydney Markets, NSW 2129  
or  
(02) 8765 9166