Office use only:
Rec:
Order no.

Sch p/o no.

cc / ch / mo / dd / invoice
Am:

Australian Insect Farm
ABN 81 697 339 519

INSECT PETS ORDER FORM

DELIVERY: business / school :

First name Surname

Street Address

Town / Suburb State Postcode

Contact number daytime: email:

PRINT CLEARLY

Delivery date: ** if giving as a gift: Male ☐ or Female ☐
(we will endeavor to dispatch your order to arrive on or close to the date you specify)

Courier details for home deliveries only: (where to leave parcel if not at home at time of delivery, must be completed for all home deliveries before order can be processed)
Choose a shady place and tic one of the following:

Leave parcel at front door — Leave parcel at back door
Leave parcel under verandah — Leave parcel in carport/garage
Or your instructions, leave parcel……

If this section is not completed, the parcel will automatically be marked to leave at the front door.

quantity	Product description	Cost
	Plus delivery	**$ 14.50**
	TOTAL	

PAYMENT METHOD

credit card: **Visa / Mastercard** **OR** ***payment enclosed:*** **Cheque / Money Order**

Card number																
Cardholders name				Expiry date	__ __ / __ __											

Security code __ __ __