

Please complete the entry form below and post or scan and email to:

**Pyramids Road Wines**  
**25 Wyberba Lane**  
**Wyberba via Ballandean Q 4382**  
[info@pyramidsroad.com](mailto:info@pyramidsroad.com)

<b>PYRAMIDS ROAD WINE OPTIONS ENTRY FORM</b>	
Team Name:	
Team Member Names:	
Team Contact Name:  Phone:  Email:	
Total Payment: ..... Players at \$100 per person	\$.....
<b>Total Payment:</b>	<b>\$.....</b>
<b>Payment must accompany your entry form. Refunds available up to 2 weeks prior to the event. No refunds after that time.</b>	
Payment Options: <b>EFT: BSB: 514179, A/c #: 1450775, A/c Name: Warren and Suzanne Smith, Ref: Your surname</b> <b>Or Credit card</b>	<input type="checkbox"/> <input type="checkbox"/>
Please charge this purchase to my <input type="checkbox"/> MasterCard <input type="checkbox"/> Visa My full card number is <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Expiry date: _____ CCV _____ Cardholder's name: _____ Signature of cardholder _____	