



MARKSMAN INDOOR FIRING RANGE

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GROUP BOOKING CONFIRMATION TO BE COMPLETED FOR ALL BOOKINGS OF FIVE PERSONS OR MORE

PLEASE COMPLETE THE FOLLOWING FORM TO CONFIRM YOUR BOOKING AND
ACKNOWLEDGE CONDITIONS OF ENTRY.

DAY AND DATE OF BOOKING: _____

TIME OF BOOKING: _____

NUMBER OF PARTICIPANTS: _____

SHOOTING PACKAGE: _____

CONTACT PERSON: _____

CONTACT NUMBER: (M) _____

(W) _____

(E-MAIL) _____

NAME OF ORGANISATION: _____

ADDRESS OF ORGANISATION: _____

DO YOU WISH TO HAVE A COMPETITION WITH A TROPHY (\$22)? YES / NO

PLEASE TURN OVER TO COMPLETE FORM

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GROUP BOOKING CONFIRMATION

BOOKING CONDITIONS

1. A non-refundable \$40pp deposit is required UPON booking.
2. Should the number of participants of the group be less than what was booked, the \$40pp deposit is non refundable and cannot be applied to other persons packages.
3. The full balance of the booking must be paid by the nominated person in a single transaction – NO SPLIT PAYMENTS.
4. Every participant must provide photographic ID (eg driver's licence or passport) or 100 points of ID on the day of the booking. NO ID – NO FIRING and this will mean loss of deposit.
5. To receive the group prices, there must be a minimum of 5 persons.
6. No sharing of packages.
7. Everyone must fire the same package.
8. Zero alcohol and/ or drug requirements for all participants.
9. No other discounts or specials apply to the group packages.
10. Please arrive at least 15 minutes prior to your booking time as the session commences promptly on the hour. If you arrive late or the instructional DVD has already begun you will not be able to fire which will mean loss of deposit.

I am aware of the above conditions and consent to all conditions of entry.

Signed _____ Name _____ Date _____

Payment Options

PAYMENT DETAILS (PLEASE CIRCLE): CHEQUE CREDIT CARD CASH DIRECT DEPOSIT

FOR CREDIT CARD PAYMENTS:

CARD NUMBER: _____

EXPIRY DATE: _____ CCV: _____ AMOUNT: _____

CARDHOLDER NAME: _____

CARDHOLDER SIGNATURE: _____

DIRECT DEPOSIT: ACCOUNT NAME: MARKSMAN TRAINING INTERNATIONAL

BSB: 065-005 ACCOUNT: 10170916 (Please advise receipt number and date of transaction)

Do you require a tax invoice? Yes / No