

**DOGS NSW - DRAFT SCHEDULE & ADVERTISEMENT REFUND FORM****AFFILIATE DETAILS:**

Affiliate Name:

Secretary Name:

Email:

Contact Number:

SHOW/TRIAL/EVENT DETAILS:

Show/Trial/Event Type:

Show/Trial/Event Name (If applicable):

Day/s:

Date/s:

Venue:

Venue Address:

Suburb:

State:

Postcode:

ENTRY DETAILS:

What date did the entries close?

Did you refund the entries to Exhibitors? Yes No **ADVERTISEMENT:**

Advertisement Month:

Size: ¼ Page ½ Page Full Page**ITEMS TO BE REFUNDED**

DOGS NSW Original Invoice Number

Invoice Date

Payment Amount

\$

Payment date

Refund Draft Schedule? Yes No

Amount of refund requested for Draft Schedule?

\$

Refund Advertisement? Yes No

Amount of refund requested for Advertisement?

\$

Refund Other? Yes No

Amount of refund requested for Other?

\$

Have you previously received a partial refund for this Show? Yes No If YES, amount?

\$

BANK ACCOUNT DETAILS

Account Name

Bank i.e. Westpac, Commonwealth

Account BSB

Account Number

Special Requests / Other Comments

SECRETARY DECLARATION

I declare that the information on this form is true and correct.

Secretary Name:

Signature:

Date:

OFFICE USE ONLY

Date of Refund:

Amount of Refund:

Approved by:

This completed application should be forwarded to:
The Accounts Department, DOGS NSW, P.O. Box 632, St Marys NSW 1790. Royal New South Wales Canine Council Ltd
ABN 69 062 986 118 trading as DOGS NSW. Phone 02 9834 3022 or email info@dogsnsw.org.au