



REGISTRATION FORM.

Number of Tickets required:
NAME(s):
Address:
Contact ph no. (hm):
Contact mobile no.:
Email:

Registration forms are to be returned to:

- 1) PCA c/- Sarah Tait, 6 Ness Grove, Papakowhai, Porirua 5024
- 2) Email to Sarah Tait (the.taits@paradise.net.nz) or Linda George (george-family@xtra.co.nz).

Please indicate method of payment:

- | | |
|--|---|
| <input type="checkbox"/> Internet Transaction
PCA Bank Account Details:
030547 0205093 00
<i>Use your name as reference</i> | <input type="checkbox"/> Cheque Enclosed
payable to:
"Porirua City Aquatics" or
"PCA". |
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**Payment required before registration form can be accepted and tickets issued.
Tickets are limited, so get your registration form and payment in as soon as possible (no later than 15 June 2012).**

