

MAX'S MAIL ORDER FORM

Name:

Address:

State:

Post Code:

Phone:

Mobile:

Fax:

Email Address:

PAYMENT DETAILS

Credit Card Type: **Visa - Mastercard - Amex**

Credit Card No. _/_/_/_/_/_/_/_/_/_/_/_/_/_/_/_ Expiry Date: _/_/_

Qty	Code	Brand/Description	Size	Colour	Total \$
Postage & Handling					
Total \$					

Prices Subject to Change without notice

Notes:

Email to: mail@maxs.nf
 Please send your order as an attachment.
 Please type ORDER in the email subject box.

Or Fax to: IDD Access Code + 6723 23006 (IDD Access code from Australia 0011.).