

*Bella Paperie*  
Paper Inspiration Retreat  
Friday November 8 – Sunday November 10  
*Registration Form*

Please complete this form and return to Bella Paperie by email, mail or in person.

*PERSONAL DETAILS*

Name:	
Address:	
Phone:	
Mobile:	
Email Address:	

*MEDICAL EMERGENCY* (In case of a medical emergency, an ambulance will be called.)

Emergency Contact:	
Phone:	
Mobile:	

Please inform us of any Allergies or Medical Conditions that we should be aware of:


*DIETARY REQUIREMENTS*

Special meals are available for health and religious reasons. Special meals will be prepared for you.


*TERMS AND CONDITIONS*

- At time of booking, a deposit of \$100 is non-refundable for full payment or payment plan.
- If cancellation occurs less than 1 month prior to event, unfortunately no refund will be given.
- A full refund will be given if Bella Paperie cancels the event.
- Bella Paperie reserves the right to use photos or videos from the event for future promotions.

I have read and accept the Terms and Conditions (please select box)

## PAYMENT DETAILS

There are two options for payment. Please select which option and complete required details.  
(Bookings will only be accepted once payment has been received.)

OPTION 1	PAYMENT IN FULL
<input type="checkbox"/> Please note that a deposit of \$100 is non-refundable	\$300 - Payment must be paid at time of booking. (Payment can be made by cash or credit card.)  Cash <input type="checkbox"/> (in store payment only)                      Credit Card <input type="checkbox"/> (Please complete Credit Card details below)

OPTION 2	PAYMENT PLAN
<input type="checkbox"/> Please note that a deposit of \$100 is non-refundable	This option is <b>only</b> available for Credit/Debit Cards (no cash payments accepted)  Please see dates below for automatic debiting of your account: (Please complete Credit Card details below.)  \$100 Deposit – Paid at time of Booking (\$100 non-refundable) \$100 payment – July 1st \$100 payment – September 1 <sup>st</sup>

### Credit/Debit Card Details: (MasterCard or Visa only)

Card Type:     MasterCard                       Visa

Card No:                      -                      -                      -

Expiry Date:                      /

CRN:                      (This is the last 3 digits on the reverse side of the card)

Signature:

Date:

For enquiries or payment please contact:

Bella Paperie  
Unit 33/302 South Pine Road  
Brendale QLD 4500  
Ph: (07) 3205 5911  
Email: [debra@bellapaperie.net.au](mailto:debra@bellapaperie.net.au)