



SPONSOR APPLICATION FORM

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Please register our facility as a DAN AP Sponsor.

Business/Organisation Name: _____

Address: _____

_____ P/Code _____

Telephone: _____ Fax: _____

Email: _____

Contact Person's Name: _____ Date: _____

Sponsor Level (Please tick the relevant box):

Gold (AUD\$500) Platinum (AUD\$1,000) Platinum Plus (AUD\$2,000)

Note: Plus 10% GST for sponsors within Australia

Payment Details:

Type of Credit Card (Please tick): Credit Card Visa Mastercard Amex

Name on Credit Card: _____

Credit Card Number: ____/____/____/____

Expiry Date: ____/____

DAN Office Use Only: Promoter Number _____

Date Promoter Kit Dispatched _____
