

ANIMAL ORDER & PAYMENT



(All fields must be complete prior to course)

COURSE DATE _____/_____/_____

COURSE LOCATION _____

NAME _____

ADDRESS _____

PHONE _____

NPWS Lic **RK / AK** _____

SPECIES CHOSEN _____

PREFERRED SEX _____ (not guaranteed)

COST OF ANIMAL _____

PAYMENT **B/Card** **M/Card** **Visa**

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Exp ___/___ **Name on Card** _____

Amount to be charged to card \$ _____

I understand and accept by signing this document that I have authorised DoLittle Farm to accept payment from me for the above amount. I understand DoLittle Farm will contact me if my ordered animal is unavailable. A receipt will be issued to me upon receiving the above listed animal on the date listed above.

Signed _____ **Date** _____

FAX IMMEDIATELY TO (02) 6366 9551



**DoLittle Farm has a "No Refund" Policy for
change of mind or failure to attend course**