



Just \$399

Price Eligibility Form for Academic Institutions

School

University

Church

1. CUSTOMER DETAILS:

| | | | |
|-----------------|--|------------|------------|
| First Name: | | Last Name: | |
| Street Address: | | | |
| City: | | State: | Post Code: |
| Phone: | | Email: | |

2. YOUR INSTITUTION DETAILS:

| | |
|---|-------|
| School Name: | |
| School Address: | |
| I have provided the dealer listed herein with ID verifying my details as above. | YES |
| Signed (Applicant to sign): | Date: |

3. DEALER TO COMPLETE:

| | |
|---|--|
| Dealer Name: | ENGADINE MUSIC EDUCATION CENTRE |
| Contact: | STEVE BROWNJOHN |
| Contact Email: | steve@engadinemusic.com |
| I have sited the photo ID of the student/teacher named herein, verifying the attendance/employment at the school listed herein. | YES |
| Signature (dealer contact to sign): | Date: |

Please send me Finale 2010 st the special student pricing of \$449 + \$19 postage

ENGADINE MUSIC EDUCATION CENTRE
Fax: (02) 9548 1392
25 Station Street
ENGADINE 2233

How did you wish to pay? **Please add \$19 courier and insurance**
 Credit Card Cheque (payable to Engadine Music
 Visa Mastercard Bankcard AMEX
 Cardholder's Name: _____
 Cardholders Number: _____
 Expiry Date: _____ CVN number _____
 (Last 3 digits on signature strip)