

# TICKET BOOKING FORM

## 2017 LEGENDS BREAKFAST

*Proudly Presented by Tennis West and Women in Tennis*

| THURSDAY 5 JANUARY 2017                               |  | 7.30AM – 9.30AM | REVELEY ROOM, PERTH ARENA |
|---|--|-----------------|---------------------------|
| <b>Ticket Sales close 5pm Monday 19 December 2016</b> |  |                 |                           |
| No. Tickets   | Price  | Total Amount    |                           |
|   | <b>\$85pp</b> - Breakfast & Hopman Cup Ticket*                                     | \$              |                           |
|   | <b>\$49pp</b> - Breakfast Only (*Must hold a valid match day ticket for Session 9) | \$              |                           |
| *Ticket to Session 9 – Czech Republic v Spain at 10am |  | Total Amount    | \$                        |

*Tables of 10. Smaller groups and Individual tickets also available*

| ATTENDEE NAME                          | BREAKFAST | HOPMAN CUP TICKET |
|--|-----------|-------------------|
| 1.                                     |           |                   |
| 2.                                     |           |                   |
| 3.                                     |           |                   |
| 4.                                     |           |                   |
| 5.                                     |           |                   |
| 6.                                     |           |                   |
| 7.                                     |           |                   |
| 8.                                     |           |                   |
| 9.                                     |           |                   |
| 10.                                    |           |                   |
| Dietary Requirements of any attendees: |           |                   |

Full Name: \_\_\_\_\_ Club/Business \_\_\_\_\_

Postal Address: \_\_\_\_\_ Postcode: \_\_\_\_\_

**Important Note – ALL Breakfast & Hopman Cup Tickets for attendees listed above will be sent to this address.**

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

| PAYMENT DETAILS          |                                 |      |            |
|--------------------------|---------------------------------|------|------------|
| Payment Method (circle): | Cheque (Payable to Tennis West) | Visa | Mastercard |
| Card Number:             |                                 |      | Expiry:    |
| Card Holder Name:        | Card Holder Signature:          |      |            |

**Ticket sales close Monday 19 December 2016.** Please return form to Elle Mazza at Tennis West  
E: emazza@tennis.com.au / PO Box 116 Burswood WA 6100 / Fax: 9361 1500 / Ph: 6462 8303