



## **Korfbal SA**

PO Box 385  
Edwardstown  
SA 5039

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### **TENDER OF STATE LEAGUE EQUIPMENT DUTIES**

NAME OF EVENT State League Equipment Duties 2018

NAME OF CLUB/INDIVIDUAL \_\_\_\_\_

NAME OF EVENT MANAGERS (If Club Only) \_\_\_\_\_

POSTAL ADDRESS \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

#### **DETAILS OF TENDER**

TENDER AMOUNT PER GAME                   \$                   (GST Inclusive if applicable)  
OR

TENDER AMOUNT – COMPETITION           \$                   (GST Inclusive if applicable)

IS THE TENDERER REGISTERED FOR GST?           YES / NO

IF SO, PLEASE PROVIDE ABN:

I/WE AGREE TO OPERATE THE ABOVE NAMED EVENT UNDER THE PROPOSED GUIDELINES OF KORFBALL SA PROVIDED THIS TENDER IS ACCEPTED BY KORFBALL SA AS THE WINNING TENDER.

SPECIAL CONDITIONS (IF ANY)

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SIGNED .....

NAME IN FULL .....

DATE .....

OFFICE USE ONLY
DATE RECEIVED