

## Temple Games Mail Order Form

Please complete and return to: Temple Games Ltd, 2 Harvey Road, London, E11 3DB

Product Description	Format	Quantity	Price (£)

**Billing/Invoice Address:**

Name:	
Address:	
Town/City:	
County:	
Postcode:	

**Contact Details:**

Telephone No.:	
Email Address:	

**Delivery Address (If Different from Billing Address)**

Name:	
Address:	
Town/City:	
County:	
Postcode:	

**Delivery Contact Details (If Different from Billing)**

Telephone No.:	
Email Address:	

**Payment Information (all cheques payable to Temple Games Ltd):**

Payment Method:	Credit/Debit Card	Cheque	PostalOrder
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Card Type:	MasterCard	Visa	Switch	Visa Delta	Solo
Card Number:					
Start Date:					
Expiry Date:					
Issue No. (Switch only):					
Card Holder Name:					
Issuing Bank:					

**Authorised By:**

Name:	Signature:
Phone Number:	Date: