Online Orders can be made at www.sequelbooks.com
OR
Complete Order Form & Return Directly to SEQUEL (contact details at bottom of page)

Secure Online Ordering Instructions

STEP 1: GO TO WEBSITE & REGISTER | STEP 2: GO TO BOOKLIST SECTION
STEP 3: SELECT SCHOOL & ORDER ROUND & YEAR LEVEL
STEP 4: COMPLETE ONLINE FORM | STEP 5: GO TO SECURE CHECKOUT
IF MORE THAN ONE STUDENT AT THE SCHOOL, SELECT “ADD ANOTHER CHILD” BEFORE PROCEEDING TO CHECKOUT

Book & Stationery List Information

• Place orders online or complete attached order form & return directly to Sequel by dates listed
• Orders are available on a prepaid basis only
• Packs can be delivered to your nominated address for only $8.00 per address
• Delivery & Payment details are located on back page of booklist

ONLINE ORDERS MUST BE COMPLETED BY:
SUNDAY 30TH OCTOBER 2016
HARD COPY ORDERS MUST BE SENT DIRECTLY TO SEQUEL NO LATER THAN FRIDAY 28TH OCTOBER 2016

Orders Will Be Delivered To Your Nominated Address Between:
SATURDAY 3RD to MONDAY 19TH DECEMBER 2016

SEQUEL’s Book & Stationery Service is a specifically & efficiently designed system to save parents and schools time, money & effort.
By ordering through SEQUEL your child will have all the necessary items selected by the School, ready for the 2017 School Year.
The modest profit that is generated stays in the School for the purpose of Fund Raising to benefit the School and all its Students.

Ordering Information / Returns Policies
Please contact Sequel with all queries regarding your orders and not your School.
Invoices are enclosed in all packs – please retain a copy of your invoice for tax purposes, returns or refunds.
Please ensure you choose booklist items carefully. Unfortunately changes cannot be made to your order once it has been submitted.
Please check orders carefully as soon as you receive them. Missing, damaged or incorrect items must be reported within 7 days of receipt of goods.
Returns will only be accepted up to 30 days from invoice date or receipt of goods. Ebooks & Digital Products are Firm Sale & cannot be returned for refund.
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**TOTAL: $___________**

**I WOULD LIKE THE COMPLETE PACK (Right Handed Scissors) FOR A TOTAL COST OF $186.25 Incl. GST [    ] *PLEASE TICK***

**I WOULD LIKE THE COMPLETE PACK (Left Handed Scissors) FOR A TOTAL COST OF $186.25 Incl. GST [    ] *PLEASE TICK***

The Complete Pack Price DOES NOT include the Home Delivery Charge.
St JOSEPH’S SCHOOL Corinda - 2017 BOOKLIST

Order Contact & Delivery Details

PARENT/GUARDIAN DETAILS:
NAME: __________________________ PHONE: __________________________

EMAIL ADDRESS: __________________________ DELIVERY ADDRESS: __________________________

SUBURB: __________________________ POST CODE: __________________________

Delivery Address can be Home / Work / Relatives / Friends / Etc
COURIERS have AUTHORITY TO LEAVE. ORDERS will be left in a Safe Dry Place at your Nominated Delivery Address
DELIVERIES TO UNIT BLOCKS WILL BE VIA “AUSTRALIA POST” - NO AUTHORITY TO LEAVE is available at UNIT BLOCK ADDRESSES
All Deliveries to Businesses will require a Signature upon Delivery

STUDENT ORDER DETAILS - PLEASE COMPLETE DETAILS FOR EACH STUDENT

STUDENTS NAME: __________________________ YEAR LEVEL in 2017: __________________________ TOTAL $: __________________________

STUDENTS NAME: __________________________ YEAR LEVEL in 2017: __________________________ TOTAL $: __________________________

STUDENTS NAME: __________________________ YEAR LEVEL in 2017: __________________________ TOTAL $: __________________________

STUDENTS NAME: __________________________ YEAR LEVEL in 2017: __________________________ TOTAL $: __________________________

DELIVERY FEE $ 8.00

TOTAL AMOUNT PAYABLE $ __________________________

PLEASE MAKE SURE YOU ATTACH OR ENCLOSE ALL ORDERS TOGETHER

Payment Details

Please complete payment details in FULL to avoid your Order Not being correctly processed

Please TICK __________________________
CREDIT CARD
CASH - Amount Enclosed $ __________________________
CHEQUE/MONEY ORDER

CREDIT CARD DETAILS
Select Card Type __________________________ MASTERCARD __________________________ VISA __________________________

CARD NUMBER: __________________________
EXPIRY DATE: __________________________
CCV #: __________________________

Name on Card: __________________________
Signature of Card Holder: __________________________

FOR SECURITY - PLEASE ENCLOSE ORDERS & PAYMENTS IN A SEALED ENVELOPE
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St JOSEPH’S SCHOOL Corinda - 2017 BOOKLIST

Payment Details

Please complete payment details in FULL to avoid your Order Not being correctly processed

Please TICK __________________________
CREDIT CARD
CASH - Amount Enclosed $ __________________________
CHEQUE/MONEY ORDER

CREDIT CARD DETAILS
Select Card Type __________________________ MASTERCARD __________________________ VISA __________________________

CARD NUMBER: __________________________
EXPIRY DATE: __________________________
CCV #: __________________________

Name on Card: __________________________
Signature of Card Holder: __________________________

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