



02 - 19 July  
Book now!

## Step into a prehistoric world frozen in time!

In this breathtaking new adventure, the chill of the Universal Kingdom: Ice Age comes alive in a dazzling fusion of puppetry, light, sound, and wonder.

### Treat your staff or clients and support conservation with a wild night out.

Full Name

Company Name

Contact Email

Contact Phone

I have attached the required finance credit application form.

**Session (date / time)** 5.30pm, 6.30pm or 7.30pm 2 July – 19 July 2026.

#### First preference

Day  Time

#### Second preference

Day  Time

*(If you do not have a second preference or would prefer to discuss please leave blank)*

#### Tickets

*Please note that the minimum order for invoiced tickets is 30, orders of less than 30 tickets can be purchased online or over the phone with a credit or debit card.*

Number of tickets

*Group rate \$33.50*

Number of cub reservations (under 4's)

*FREE - Cubs require a free reservation; we can book this for you or they be added later via the website.*



# Zoos SA Credit Application Form Royal Zoological Society of SA Inc.

ABN 38 750 470 952



## BUSINESS CONTACT INFORMATION

Company name		ABN	
Contact		<input type="checkbox"/> Sole proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Other	
Phone			
E-mail			
Registered company address City, State Post Code			

## BUSINESS AND CREDIT INFORMATION

City, State Post Code			
Primary business address City, State Post Code			
<b>Accounts Payable Contact Details:</b>			
Name		Bank Name	
Phone Number		Account number	
E-mail		Type of account	<input type="checkbox"/> Savings <input type="checkbox"/> Cheque <input type="checkbox"/> Other

## BUSINESS/TRADE REFERENCES

Company name		Phone	
Address		Fax	
City, State Post Code		E-mail	
Type of account	<input type="checkbox"/> Savings <input type="checkbox"/> Cheque <input type="checkbox"/> Other	Other	
Company name		Phone	
Address		Fax	
City, State Post Code		E-mail	
Type of account	<input type="checkbox"/> Savings <input type="checkbox"/> Cheque <input type="checkbox"/> Other	Other	
Company name		Phone	
Address		Fax	
City, State Post Code		E-mail	
Type of account	<input type="checkbox"/> Savings <input type="checkbox"/> Cheque <input type="checkbox"/> Other	Other	

## AGREEMENT

- All invoices are to be paid 14 days from the date of the invoice.
- Claims arising from invoices must be made within seven working days.
- By submitting this application, you authorise Royal Zoological Society of South Australia to make inquiries into the banking and business/trade references that you have supplied.

## SIGNATURES

Signature		Signature	
Name and Title		Name and Title	
Date		Date	