



DIRECT DEBIT AUTHORITY

I,

Hereby authorise Dedes Restaurant to Debit my

Bankcard / Mastercard / Visa / Diners / Amex

(please note: all credit cards will incur an extra 1.5% merchant fee on the total amount payable)

___ / ___ / ___ / ___ expiry ___ / ___

for the amount of \$.....

Signature of Cardholder

For a function to be held on

Function room required.....

Address:.....

(for Confirmation Letter to be sent)

Contact phone numbers:

Restaurant – Function Centre - Watergrill

Sydney Rowing Club

613 Great North Rd, Abbotsford 2046

Phone: 9712.5503 Fax: 9713.5105

www.dedes.com.au

[email: functions@dedes.com.au](mailto:functions@dedes.com.au)

ABN 76 013 239 330 ACN 077 703 569

