

**Genetics Teaching Kit for Schools**  
**Department of Genetics**  
**University of Melbourne**  
**Victoria, 3010.**  
**ABN: 84002705224**

Phone: 03 8344 5135  
 Fax: 03 8344 5139  
 Email: darrenwm@unimelb.edu.au



**THE UNIVERSITY OF**  
**MELBOURNE**

**Order Form for Genetics Teaching Kits for Schools**

**Name:** .....

**School:** .....

**Postal Address:** .....

.....

**Phone:** ..... **Fax:**.....

**Email:** .....

**Please note: Cut off date is 1<sup>st</sup> May for orders.**

Type of Kit D1	Number of Kits		Cost per 1 Kit	Total
<i>Drosophila melanogaster</i> Monohybrid Cross 3+:1vg			\$10.00	
		Delivery selection (Please tick one)	Sub total	
Week of kit(s) delivery	13 <sup>th</sup> July	<input type="checkbox"/>	Postage / Handling 1- 6 kits \$8.00 7- 20 kits \$10.00 > 21 kits \$18.00	
	20 <sup>th</sup> July	<input type="checkbox"/>	Sub total	
	27 <sup>th</sup> July	<input type="checkbox"/>	+ GST 10%	
			<b>Total</b>	

**Fax the official School Purchase Order together with this order form.**  
**The University of Melbourne Invoice will be posted out with the kit.**