



Course Title:

Course Location: Course Date:

Last Name: First Name:

Preferred Name on Name Tag:

Organisation: Position:

Address:

Suburb: State: Postcode:

Phone: Email:

Dietary Requirements:

Special Requirements:

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REGISTRATION FEE:	<input checked="" type="checkbox"/> \$440 (plus GST) per attendee	<input checked="" type="checkbox"/> \$65 (inc GST) laptop hire	Do you require a laptop?	<input type="checkbox"/> Yes
				<input type="checkbox"/> No

This form will be a tax invoice for GST purposes when completed and payment is made.

Direct Deposit

BSB No: 062 238

Account No: 1012 6316

Account Name: Lorraine M Poulos & Assoc

Amount: \$

Include name of attendees in payment description and post remittance advice and registration form to:

Level 3, 42 Eastern Avenue, Dover Heights NSW 2030

Credit Card

Visa MasterCard

Card No: _____

Expiry Date: _____

Cardholder Name: _____

Amount: \$ _____

Signature: _____

Cheque

Payable to Lorraine M Poulos & Associates

Mail with registration form to:

Level 3, 42 Eastern Avenue, Dover Heights NSW 2030

Contact:

Lorraine Poulos

email: lorraine@lorrainepoulos.com.au

www.lorrainepoulos.com.au

02 9337 2337 | 0425 214 792

Terms & Conditions:

1. Registration is guaranteed upon receipt of full payment
2. Full payment must be received 2 working days prior to the commencement of the course (unless otherwise agreed).
3. LPA reserves the right to cancel or re-schedule courses with 7 days notice. Fees can be refunded or held in credit towards the next available course.
4. Cancellations made less than 3 weeks prior to the training date may incur a 50% fee.
5. Cancellations made 24 hours or less prior to the training date may incur a 100% fee.

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signature