



REGISTRATION FORM

Please tick if:

- RECEIPT REQUIRED
- PREVIOUS STUDENT

NAME
(FIRST) (SURNAME)

ADDRESS

SUBURB POSTCODE

TELEPHONE (home)
..... (mobile)

EMAIL:

EMERGENCY CONTACT (name)
..... (relationship)
..... (telephone)

CLASS TIME/DAYS

LOCATION

REGISTRATION FEES FOR THE 10 WEEK SESSION:	
	Pensioner/student rate
1 x p.w. = \$180.00	1 x p.w. = \$140.00
2 x p.w. = \$240.00	2 x p.w. = \$190.00
3 x p.w. = \$285.00	3 x p.w. = \$225.00
4 x p.w. = \$300.00	4 x p.w. = \$240.00
Introductory Offer for 4 Classes \$60.00 – Casual class \$20.00	

PLEASE MAKE CHEQUE PAYABLE TO:

OFFICIAL USE ONLY

Cheque Amount
Money Order
Cash Date
EFT

RECEIPT ISSUED YES/NO Date