

Course Registration Form (Group Booking)



COMPANY DETAILS

Company name

Contact Name

Position

Phone Number

Mobile

Email

Office Address

Postal Address

COURSE ENROLMENT INFORMATION

Course Name

Course Date(s)

Preferred Start Time

Number of Participants

Course Location

Total Cost for Course Booking

ADDITIONAL INFORMATION

Do you consider any of your staff to have special needs (for example: English language support, use of mathematics at work, or long term impairment) that will impact on learning during this program?

Yes No

If yes, please provide more information so that we can prepare, in consultation with you and your staff member/s, the appropriate and relevant support arrangement:

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PAYMENT DETAILS

I intend paying by:

DIRECT DEPOSIT

CHEQUE

VISA OR MASTERCARD (2.5% Surcharge applies)

We will send an invoice to you on receipt of this form.

TERMS AND CONDITIONS

1. Payment is required at least 15 working days prior to course commencement.
2. Any course cancelled within 10 working days prior to the commencement date will incur a fee equivalent to 100% of the nominal daily training rate.
3. Postponement of any course within five working days of the course commencing will incur an administrative fee of 50% of the nominal daily training rate.

DECLARATION

I declare that the information supplied on this form is correct and complete. I have read, understood and agreed to PeopleSafe Australia's policies and procedures described in the [Participants Handbook](#) and Course Information Brochure.

Name

Signature

Date

PLEASE FORWARD THIS FORM WITH PAYMENT TO:

Mail: PO Box 600, Sutherland, NSW 1499

Fax: 02 8580 6330

Email: training@peoplesafe.com.au

Thank you for your business.