



PARTICIPANT REGISTRATION FORM

Edmund Rice Education Australia- Flexible Learning Centre Network

Provider No: 31330

CHC42108 Certificate IV in Career Development

Please print all details clearly

VENUE FOR WORKSHOP:

Participant's Name (as required on certificate)

Title: _____ Surname: _____ First Name: _____

School: _____

School Address: _____

_____ Postcode: _____

Home address _____

Phone: _____ Date of Birth _____

Your Email: _____

Highest level of education: _____

Are you Aboriginal/Torres Strait Islander Yes / No (please circle)

What is your country of birth: _____

Special needs in relation to training/assessment: _____

Special dietary requirements: _____

SET plan Co-ordinator: _____

SET plan Co-ordinators email address: _____

Own laptop to bring to workshop? Yes / No (please circle)

Cancellations and refunds.

Cancellations will be accepted up to 2 weeks prior to the commencement of the workshop by phoning Sharon Webster on: 0419255621. The refund will be the course fee less a 20% administration charge. After that date no refunds will apply however substitute participants will be accepted.

Please direct administrative enquiries to Sharon Webster, email training@ereflc.org.au and course requirement enquiries to your identified trainer

SUITABILITY QUESTIONS

Answers to the following question will enable trainers to ensure that the delivery and assessment process is suitable to your needs:

- Are you currently working as a Career Guidance Officer or Careers Counsellor? _____
- Have you completed a Certificate IV in Training and Assessment (TAA40104)? _____
- How many years of teaching experience do you have? _____
- Are you involved with SET planning in a secondary school or educational institution? _____
- Are you able to bring the required documents to gain RPL _____
(Non submission of documents and 3rd party report will result in a Statement of Attainment only)

Enrolment is completed **only** when full payment is received and this registration form is returned by mail to: Sharon Webster

Edmund Rice Education Australia – Flexible Learning Centre Network, PO Box 923, Indooroopilly, 4068

A confirmation of enrolment email will be sent on receipt of both full payment and the completed registration form. The non- refundable period is 2 weeks prior to the commencement of the workshop. If your nominated payment option is credit card, your details will be processed at this time.

Payment details – Enrolment will not be confirmed without the information below.

Payment Options/ Tax Invoice	ABN: 38 961 317 851
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Please tick to choose payment method

<input type="checkbox"/> Payment by Cheque	<input type="checkbox"/> Payment by EFT
<ol style="list-style-type: none"> Complete the Registration Form and Tax Invoice details and attach cheque. Retain a copy for your records Cheques should be made payable to: EREA-FLEXIBLE LEARNING CENTRE NETWORK. Registration Form & cheque should be addressed and posted to : EREA- FLEXIBLE LEARNING CENTRE NETWORK. PO Box 923, Indooroopilly, 4068. 	<p>Bank Name: Archdiocesan Development Fund Account Name: Edmund Rice Education Australia – Flexible Learning Centre Network. BSB: 064 786 Account No: 244436002 Reference: Your school name. Complete and mail the registration form to secure your place and ensure payment is made before the workshop.</p>

<input type="checkbox"/> Payment by Visa or Master Card	
Account/ Cardholder name (please print)	
<input type="text"/>	€ Mastercard
<input type="text"/>	€ Visa Card
Authorised by- If different to above (Please print)	Total amount payable
<input type="text"/>	\$ <input type="text"/>
Signature	Expiry date of card
<input type="text"/>	<input type="text"/>

Upon Payment this document will become a tax invoice. A photocopy should be kept for your records.

MODIFICATION HISTORY

Jan 2010 V2

- **Removed course information section to separate file**
- **Add credit card and EFT facilities.**
- **Changing registration form to be used as a tax invoice.**