



PARTICIPANT REGISTRATION FORM

Edmund Rice Education Australia- Flexible Learning Centre Network

Provider No: 31330

TAA40104 Certificate IV in Training and Assessment

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 _____

Work Phone: _____ Date of Birth _____

Your business 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: _____

VET Co-ordinator: _____

VET 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:

- Name the Training Package or Accredited Program you are currently delivering or intending to deliver: _____
- How many years of teaching experience do you have? _____
- How many years have you been teaching VET? _____
- Are you delivering in partnership with another provider? _____
- Are you delivering training in a secondary school or educational institution? _____
- What is the level of the Certificate you will be delivering? _____
- 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

Please tick to choose payment method

Payment by Cheque

1. Complete the Registration Form and Tax Invoice details and attach cheque.
2. Retain a copy for your records
3. Cheques should be made payable to: EREA-FLEXIBLE LEARNING CENTRE NETWORK.
4. Registration Form & cheque should be addressed and posted to : EREA- FLEXIBLE LEARNING CENTRE NETWORK.
PO Box 923, Indooroopilly, 4068.

Payment by EFT

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.

Payment by Visa or Master Card

Account/ Cardholder name (please print)

€ Mastercard

€ Visa Card

Authorised by- If different to above (Please print)

Total amount payable

Expiry date of card

\$		
----	--	--

Signature

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

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

MODIFICATION HISTORY

Feb 09 V3

- Price increase
- RPL documentation changes to show RPL and portfolio of documents and 3rd party report requirements
- Clearer instructions on what to bring to the workshop
- Suitability questions to enable the trainer to ascertain the likelihood of the participant being able to obtain the full qualification based on their knowledge, skills, experience and current teaching role.
- Authority statement re payment.

Sep 09 V 3.1

- Specify work phone contact
- Split training experience into 2 areas.

Jan 2010 V4

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