



Speechcraft Registration Form

How to register:

- Complete the highlighted form fields below. Save the file.
- Transfer your \$100 deposit or the full amount of \$450 using the bank account details below.
- Email the completed form and deposit receipt to **speechcraft-sa@d73.toastmasters.org.au**
- Please pay the balance (if applicable) before the first session.

| Course details: | | | | | |
|-----------------|--|-----------|--------|-----------|----------------------------|
| Session 1 | | Session 3 | | Session 5 | |
| Session 2 | | Session 4 | | Session 6 | |
| Venue: | Education Development Centre, Milner Street, Hindmarsh | | | | |
| Start: | 5:45pm for 6:00pm | Finish: | 9:00pm | Price: | \$450 (GST not applicable) |

Note: There is no session on Mon 9 Mar 2015 due to Adelaide Cup Public Holiday.

| Your contact details: | | | |
|-----------------------|--|--------|--|
| First Name | | Phone: | |
| Last Name | | Mobile | |
| Email Address | | Other | |
| Postal Address | | | |
| | | | |

| Electronic Funds Transfer (EFT) Payment details: | | | | | |
|--|--------------------------------|----------------|--------------------------------|------------|------------------|
| Deposit: | \$100 due on registration | Balance: | \$350 due before first session | | |
| Account name | SA Governors Toastmasters Club | | | | |
| BSB | 633000 | Account number | 132739798 | Reference: | <i>Your name</i> |

| Invoice details: <i>(if applicable)</i> | |
|---|-------------|
| Do you require an invoice? | Yes No |
| Invoice Name | |
| Invoice Address | |
| Suburb | |

I understand that should I fail to complete or attend the course I will not receive any refund.

Signed: _____ Date: _____