VAST ACADEMY

BOREC House, Grnd Flr, 25 Station St, Penrith NSW 2750
PH: 02 4732 5000 FAX: 02 4732 6226

STUDENT REGISTRATION FORM

Course Date/s: _____ **Location:** _____

Course:_____

Surname: _____

Given Name: _____

Address: _____

Suburb: _____Postcode: _____

Date of Birth: _____Nationality: _____

Home Phone_____Mobile: _____

If you would like to be placed on the mailing list for the **VAST Newsletter** please complete Email Address: _____

All PAYMENTS MADE PAYABLE TO:

VAST ACADEMY
PO BOX 1137
Penrith NSW 2750

ALL CREDIT CARD PAYMENTS WILL INCUR A 3% ADDITIONAL FEE

Amount: _____

CASH ☐ **CHEQUE** ☐ **CREDIT CARD** ☐

Credit Card Number

Visa ☐ MasterCard ☐ Amex ☐

Expiry Date

___/___

Cardholders' Signature _____

Cardholders' Name (please print) _____

COURSE PAYMENTS, CANCELLATIONS AND REFUNDS

A deposit of $100 must be presented, along with the Application Form, to secure your enrolment on a course. Final payment is due prior to the commencement of the course.

A receipt and letter of confirmation of your place in the course will be forwarded to you by mail. If you are unable to attend your course and providing you notify the office (4 days) in writing (email) or by phone, you are entitled to a full refund. If you start the course and have paid in full and are unable to complete the course for unforeseen reasons then a refund on a pro-rata basis will be calculated**.**

I give permission for any of my work to be used or provided to others for the purpose of audit and other government related information gathering.

I have read the student information supplied.

Student Signature: _____ **Date:** _____