Collision Industry Training
Registration & Booking Form

August 2010

STUDENT DETAILS

_____ _____ _____
First Name *Surname* *Student ID No. (if known)*

Company Name: _____

Postal Address: _____

_____ Postcode: _____

Telephone (Business): ( )_____ Facsimile: ( ) _____

Email: _____

(PLEASE NOTE: Your confirmation will be sent to this email address or your fax number in the absence of email)

COURSE REGISTRATION FEES

	Please tick	Total Cost
Morning Course 8.30am **DAM08** **Advanced Material Damage Analysis**	.....	$ 242.00
Afternoon Course 1.00pm **DAM04** **Side & Rear Impact Analysis–Restraints, Interior, Glass**	.....	$ 242.00
N.B. Lunch will only be provided for those attending both courses **Tea, coffee and biscuits for morning or afternoon courses**	**TOTAL PAYABLE**	$

DATE AND VENUE DETAILS

Armidale Quality Hotel Powerhouse, 31 Marsh St, Armidale **Thursday 19th August** ☐

Coffs Harbour BreakFree Aanuka Beach Resort, 11 Firman Drive, Coffs Harbour **Wednesday 18th August** ☐

PAYMENT DETAILS

Please debit my: ❑ CAPRICORN SOCIETY LIMITED ACCOUNT NUMBER: _____

❑ VISA ❑ MASTERCARD ❑ AMEX

Card/Account No: | | | | | | | | | | | | | | | | | Expiry Date: | | | |

Card Holder's Name: _____

Card Holder's Signature : _____

❑ DIRECT CREDIT ANZ Virginia BSB 014-275 Account No. 4941 37276

Please complete and fax back to: **(07) 3255 1445** at least **5 days prior** to your venue date

I-CAR Australia
PO Box 3063, South Brisbane Qld 4101
Ph: (07) 3255 0447 or Email: admin@i-car.com.au

Registrations will not be processed unless accompanied by payment.
Numbers are strictly limited.

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