



Milpara Community House Inc.

Short Enrolment Form 2020

Please complete the enrolment form and return it either in person, by email milpara@dcsi.net.au or mail (PO Box 136 Korumburra 3950).

Please note: Enrolment is not complete until the completed enrolment form and full payment is received.

Course Name:	
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Participants Name:			
Date of Birth:			
Street Address:			
Concession:	<input type="checkbox"/> Health Care	<input type="checkbox"/> Pension	Other:
Day Time Phone # :		After hours Phone #:	
Email Address			
Course Cost:		Date Paid:	
Participant Signature:			

In signing this form, I hereby agree to abide by the Code of Conduct for Milpara Community House Inc.
(A copy of this document is on display in each of the training spaces.)

1. **How did you hear about this course?**

Term Program Local Paper Word of Mouth Milpara Website
Facebook Online Other: _____

2. **Would you like to be added to our email list to receive the term program?** Yes No

3. **Do you have any suggestions for future courses/classes?** _____

4. **Please select your payment method:**

- Cash
- Cheque made payable to: Milpara Community House
- Direct deposit Commonwealth Bank: Milpara Community House, BSB 063515 Account No. 00901901 *(Please quote your surname and course as a reference.)*

Office Use Only: Enrolment Received Date:	Receipt Number :
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