

PO Box 6354 Park Beach Plaza COFFS HARBOUR NSW 2450

at the entrance to the Showground, Pacific Highway, Coffs Harbour Phone: 02 9069 5774 Email: chcaqclassesworkshops@gmail.com

Classes & Workshops ENROLMENT FORM

PLEASE PRINT NAME		AGE (youth)		
ADDRESS				
		POSTCODE		
PHONE (H)	(M)			
EMAIL				
NAME OF	CLASS OR WORKSHOP plus CC	<u>DDE</u>		
1	CODE:	FEE:		
2.	CODE:	FEE:		
3	CODE:	FEE:		
Are you a Financial Member of C		DTAL \$		
	PAYMENT OPTIONS			
Cash \$ In Person: Fill in the form, place it to	Please note: Cheques are no			
Treasurers Green Letterbox in the G Internet Direct Deposit \$ Date Receipt #	DIRECT DEPOSIT: Account Name: Coffs H Bananacoast Credit Unio BSB: 533 000 Account Number: 3283 Your payment reference mu	DIRECT DEPOSIT: Account Name: Coffs Harbour Creative Arts Group Bananacoast Credit Union (a division of Police & Nurses Ltd) BSB: 533 000		
<u> </u>	this interactive PDF form and email the per to the Treasurer cheagtreasurer@c			
booking or you may transfer to another clas	the class or workshop, we will refund in full as or workshop if there are vacancies.			

If you cancel your enrolment, a minimum of seven (7) days' notice is required in order to receive a full refund of fees paid. If less than 7 days' notice is provided, an administrative fee of 10% of the total class or workshop fee will be deducted from your refund. However, if you give less than 48 hours' notice, or the class or workshop has already been committed to proceed because of your enrolment, or the class or workshop has already commenced, we cannot refund your fees. If there are exceptional circumstances which forced your withdrawal, you may email chcagtreasurer@gmail.com within five days of class or workshop commencement to request consideration for a refund. A partial or full refund may be approved or declined, and assessed on a case-by-case basis.

	I have read and agree to the Cancellation Refund Policy as above	Signed:	Date:	
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