



Course Registration Form

ABN 25 149 097 852,
 53 Brisbane Road,
 Newtown Queensland 4305
 P: 07 3281 2489
 E: training@attaintraining.com.au

Attendee	Email Address	Contact No.	Course Code / Details	Course Cost

Subtotal	
GST	
Total	

Training on Client Site Training at Attain Training Site

Booking Contact		Accounts Payable	
Contact Name:	_____	Contact Name:	_____
Job Title:	_____	Job Title:	_____
Organisation:	_____	Organisation:	_____
Address:	_____	Address:	_____
	_____		_____
Phone / Mobile:	_____	Phone / Mobile:	_____
Email:	_____	Email:	_____

Training Terms and Conditions

1. Course fees are payable a minimum of 5 days prior to course commencement.
2. Course participants must comply with course prerequisites.
3. Cancellation and transfers – see [Terms & Conditions](#) located on our website www.attaintraining.com.au/about_us.
4. All changes must be made in writing.
5. Attain Training 24/7 reserves the right to change course schedules, course pricing, discontinue courses, modify course content, limit class size, cancel courses and refuse entrance to a course.

I accept the terms and conditions contained in this document

Authorising Signature: _____ Date: _____

Payment

Please Invoice our company : _____

Deduct payment from Visa Card MasterCard

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Cardholder Signature: _____

I have direct credited the following - A/C Name: Recruitment 247 Bank Bendigo Bank

BSB Number : 633 000 **A/C Number** : 142795582 **Reference**: Your name and course code

Transaction reference number #: _____ Paid _____

Catering (Lunch) Form

ABN 25 149 097 852,
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For our full day courses we offer a lunch menu which has a variety of breads and selection of delicious cold meats and/or salads.

Please fill in the form below for catering purposes and if there are any participants attending who have food preferences or allergies please indicate by filling in the relevant details below, as we will be happy to attend to their dietary needs.

***** NOTE: Tea, coffee and water are available along with morning tea during half day and full day courses. *****

Name	Surname	Dietary Requirements (Vegetarian / Allergies / Intolerances)

Please provide any details on dietary requirements above relating to allergies or intolerances listed below.

<i>Peanut Allergy / Intolerance</i>	<i>Tree Nut Allergy / Intolerance</i>	<i>Milk (Dairy) Allergy / Intolerance</i>	<i>Gluten / Wheat Allergy</i>
<i>Egg Allergy / Intolerance</i>	<i>Sesame Allergy / Intolerance</i>	<i>Soy Allergy / Intolerance</i>	<i>Lactose Intolerance</i>
<i>Fish Allergy / Intolerance</i>	<i>Shellfish Allergy / Intolerance</i>	<i>All Seafood Allergy</i>	<i>Other Allergies / Intolerances</i>