

Enrolment Form: Pregnancy Massage

Instructions:

1. Complete Sections A & B.
2. Select a Method of Payment in section B and sign the Fee Policy.

Note: You must pay the full amount for the certificate course to confirm your place in the course.

Section A: Personal Details

Title

Family Name

Given Names

Contact Address – Street Number and Name

City/Suburb

State

Postcode

Daytime Phone Number

Mobile Phone

Date of Birth

Email address

Certificate of Pregnancy Massage

To confirm my enrolment I would like to use the following payment option:

- Option 1 – Early Bird:** Full payment with amount due: **\$450**
(received one month prior to commencement date)

- Option 2 – Full payment** **\$500**

Start Date: _____

Melbourne Brisbane Sydney Adelaide Perth

Section B: Payment Method

I enclose the following amount as payment: \$ _____

Cash (do not send money through the mail)

Cheque or Money Order (payable to Copeland College of Massage Therapy)

Credit Card: Visa MasterCard Bankcard

Name on the Card: _____

Card Number:

Expiry Date: _____ Signature: _____

Fee Policy

Fees quoted are valid from January 2009, however the college reserves the right to alter fees. Fees are non-refundable. Copeland College of Massage Therapy reserves the right to cancel a subject or course in which case I will receive a full refund.

I have read and understood the Fee Policy and accept it as a condition of my enrolment at Copeland College of Massage Therapy.

Signature: _____ Date: _____