



Computer Smart TRAINING CENTRE

Ph: (07) 55395 666

Suite 6, 153 Cotlew Street Q 4214
PO Box 4049 Ashmore Plaza Q 4214
Email: contactus@computersmart.com.au

HOW TO ENROL

1. Complete the Enrolment Form
2. Enclose Payment
3. Post to: Computer Smart
PO Box 4049
Ashmore Plaza Q 4214
4. Or fax to: (07) 55392 666
5. Or Email to:
contactus@computersmart.com.au

ENROLMENT FORM

PERSONAL DETAILS (please print clearly)

FIRST NAME _____ SURNAME _____

COMPANY _____

ADDRESS _____ P'CODE _____

PHONE _____ MOBILE _____ FAX _____

EMAIL _____

COURSE DETAILS

Course Name _____ Course Day _____ Course Date _____

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Course Cost: \$ _____ Manual Cost: \$ _____ Office Version: 03 / 07 / 10 (please circle)

PAYMENT DETAILS

A deposit of \$100.00 per course is payable within 7 days to secure your booking.

Payment Amount _____ Date Paid _____

Payment Method Cash Cheque Visa MasterCard

Cardholder's Number _____ Expiry Date _____

Cardholder's Name _____ Signature _____

REFUND POLICY

No Show – Should the student not turn up on the day the full course fees will be forfeited.

Cancellation or Postponement – All monies (including deposit) are fully refundable if the participant cancels at least 3 working days prior to the commencement of the training course.

DECLARATION

I understand that my enrolment is accepted under the condition that course fees are paid in full on or before the date the training course commences and that all information provided above is correct and complete. I also understand that the fees paid are to cover the course content as outlined on our website and that the time taken is variable due to a number of factors.

Signature of Participant _____ Dated _____

OFFICE USE ONLY

Confirmation sent to Client _____ INV # _____