

ENROLMENT FORM

Client ID Number: <i>(office use only)</i>		CIPSA Membership Number:	
Personal Details: <i>(PLEASE PRINT CLEARLY)</i>			
Title: Mr Ms Mrs Miss	Surname:	Given Names:	
Address: <i>(HOME)</i>		State	Post Code
Telephone:	<i>(HOME):</i>	<i>(MOBILE):</i>	
Email Home:			
Occupation:			

Employer Details: <i>(PLEASE PRINT CLEARLY)</i>	
Employer Name:	
Employer Address:	
Telephone:	Fax:
Email Work:	

Enrolment Details: <i>(PLEASE PRINT CLEARLY)</i>		
COURSE AND SUBJECT NAME	TRAINING TYPE	COURSE START DATE PREFERENCE
	WORKSHOPS <input type="checkbox"/>	
	DISTANCE <input type="checkbox"/>	

Preferred Address for Mail:

☐ Home

☐ Work

Prior Training/Education:		
Qualification Gained	Training Institution	Date

Employment History

Employer Name	Address	Position/s Held	Dates Employed

Attendance Reasons *(this information will be kept confidential)*

People attend training programs for any number of reasons. To ensure you obtain the maximum benefit from the course please tick one of the boxes below or write your reasons for enrolling in this particular program

- ☐ enhance work prospects
☐ obtain a recognised qualification
☐ personal development
☐ career change
☐ other (please specify)

Payment Details

- ☐ Cash
☐ Cheque Enclosed
☐ Please Invoice my Employer *(details above or provide here)*
☐ Direct Credit: ANZ Account Number: 014 002 198480686 Supply Chain Management Education Australia
☐ Card (please tick one) ☐ Visa ☐ MasterCard ☐ Bankcard ☐ AMEX (3% surcharge applies)

Signature of Cardholder:

Name of Cardholder: -----

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Expiry Date: /

Payment Amount: A\$

NOTE: Fees must be paid in full prior to course commencement

Signature

I hereby acknowledge that I have provided all relevant and accurate information above, and that I've read and accepted the SCMEA Cancellations and Refund Policy.

(CLIENT SIGNATURE)

(DATE)

OFFICE USE ONLY

- | | |
|--|--|
| <input type="checkbox"/> CIPSA Membership Included in Fees | <input type="checkbox"/> SCMEA Online Email Sent |
| <input type="checkbox"/> Full Payment Received | <input type="checkbox"/> Database Updated |
| <input type="checkbox"/> Receipt Issued | <input type="checkbox"/> Maxbulk Mailer Updated |