

Request for Withdrawal of Enrolment Form

REGISTRATION COURSES

PERSONAL DETAILS

Mr Mrs Ms Miss

Surname _____

Given names _____ Date of birth _____

Email _____

Mobile _____ Phone _____

COURSE DETAILS (Details of course you are currently enrolled in)

Sales Representatives Registration course OR Property Management Registration course

Classroom OR Distance learning

DECLARATION

I have read, understood and will comply with all requirements outlined in the **REIWA Training Refunds and Transfers Policy**.

Student's signature _____ Date _____

REFUND DETAILS (If applicable)

Please note: Any eligible refunds will be credited as per payment method

Please refund my credit card

Mastercard Visa Amex

Card number _____ Expiry _____ CCV _____

Name on card _____ Card holder's signature _____

