



Elective CPD Group Enrolment Form

PAYMENT DETAILS

Please select ONE payment option:

Credit Card: Mastercard Visa Amex

Card number: _____ Expiry: _____ CCV: _____

Name on card: _____ Card holder's signature: _____

REIWA member account:

Agency name: _____ Member number: _____

Principal's name: _____

Principal's signature: _____ Date: _____

Please also note that the student is the customer of REIWA Training, regardless of who pays for the course and as such no personal details or information relating to the student will be disclosed with a third party without the student's written consent.

ENROLMENT INFORMATION

REFUND POLICY

Participants who withdraw from a course prior to commencement may be eligible for a partial refund. If insufficient bookings are received 7 days prior to the commencement date courses may be cancelled. If for any reason the course is cancelled by REIWA Training after your enrolment, a full refund of fees will be made, however the Institute does not accept any liability for airfares or pre-paid accommodation expenses. For a full copy of our refund policy please visit our website reiwatraining.com.au.

PRIVACY STATEMENT

The primary purpose of collecting personal information that you supply on this form is to process your enrolment. We may also use these details to keep you informed of upcoming events and will not disclose your information to a third party unless permission has been provided. For more details of REIWA's privacy policy, please visit the website at reiwatraining.com.au.

ENROLMENTS

All enrolments are confirmed in writing before the course starts, giving details of the course start times, venue, travel and parking guides. In the unlikely event you do not receive confirmation of a course prior to the commencement date, please contact REIWA Training immediately.

Did you know we also offer in-office group training?

CAN'T COME TO US...WE CAN COME TO YOU!

Contact us to discuss your training needs and we can arrange group training for your team at a time and location suitable to you.

Principal's signature: _____ Date: _____

RETURN COMPLETED FORM TO: training@reiwa.com.au

