

2019 Community Seminar Series Registration Form

Press Tab key to enter fields and type in your information

Seminar Title Attending:			
Date:		Amount:	\$80.00

No: Person/s Attending:			
Name/s:			

Organisation Name:			
Address:			Postcode:
Phone:			
Email:			

Dietary Restrictions or Special Requirements:	Name	Dietary Restrictions
	1.	
	2.	
	3.	
	4.	

Click to select

<input type="checkbox"/>	Self-funded – Please fill out details for invoice below:
<input type="checkbox"/>	Organisation to pay – Please fill out details for invoice below:

PAYMENT DETAILS: (Organisation or Self-funded)

Organisation Name:			
Address for Invoice:			
Suburb:	Pcode:		
Phone:			
Email:			

Self-funded Attendee Name:			
Address for Invoice:			
Suburb:	Pcode:		
Phone:			
Email:			

Please note:



Payment can be paid once you have received your invoice from Eastern Health. *(Full payment details on your invoice)*

For registration, please complete this form and email to: communityseminarCYMHS@easternhealth.org.au
Alternatively you can fax your registration details to 03 9870 7973

SAVE FORM
COMPLETE
ATTACH VIA E-MAIL

If you have not received an email confirmation of your attendance at this event within three business days of submitting this form, please contact administration on above email address.

All prices and dates quoted are subject to change by CYMHS. Seminar fees are kept as low as possible. Enrolled participants will be notified of any changes to advertised programs when necessary. Participants are **not entitled** to a refund unless **written cancellation** has been received at least **24 hours prior to the event**. The department reserves the right to cancel any scheduled programs when necessary and course fees will be refunded if the course is cancelled.