

Registration details

Name:	Phone:	
Company name:	Email:	
Position:	Gender (optional):	
Street address (please note PO boxes will not be accepted):		
Emergency contact: Name	Relationship	Phone
Please note any requirements (physical, dietary, medical, mobility or access requirements):		

How did you hear about NIDA Corporate?

- ☐ Word of mouth ☐ Direct mail ☐ Flyer/Brochure ☐ Article ☐ Email ☐ Internet ☐ LinkedIn
☐ Other (please specify)

Please tick this box if you do not wish to receive information about NIDA events and products by mail or email ☐

Booking details

Course name:	Location:	Date(s):
What do you hope to gain from attending this course?		
What type of presentations/communication scenarios do you currently experience?		

Payment details

Method of payment:

- ☐ Direct deposit (details can be found on the invoice emailed to you)
☐ Cheque (please address to 215 Anzac Parade Kensington NSW 2033 upon receiving the invoice)
☐ Credit card* (Diners not accepted) ☐ Visa ☐ Mastercard ☐ Amex (will incur 1.5% surcharge)

Please charge credit card for the amount of: AUD \$

Name on card: Card no.:

Exp: — CVC: Signature:

- ☐ Invoice (unless specified, invoice will be emailed to address that sent this form)

Name and address to invoice (if different from above):

Your Accounts Dept phone: Purchase Order no. (where required):

Terms and conditions

- Cancellations received more than 14 days from the commencement of the course will incur a 20% cancellation fee.
- Transfers to another course must be completed more than 14 days from the commencement of the course and will incur a \$150 transfer fee.
- Cancellations or transfers between 7 and 13 days from the commencement of the course will incur a forfeiture of 50% of the course fee.
- Cancellations or transfers within 7 days of the commencement of the course cannot be processed and will incur a forfeiture of 100% of the course fee.
- Substitutions of participants can be made at any time.
- Should NIDA need to cancel a course a full refund will be obtainable. We accept no liability for any other costs.

In submitting this form I acknowledge that I have read and accepted these conditions

Signature: Date: — —