



When it comes to **business**



has you covered

Software Solutions - Sales & Marketing, Accounting, Help/Service Desk, Networks

Professional Services - Accounting, Tax, Audit, Financial Planning, Mortgages

The Accolade Group Jiwa Training Registration Form

Attendee First Name _____ Surname _____
 Company Name _____ Position _____
 Address _____
 Phone _____ Fax _____ Email _____
 Course Name _____ Course Date _____
 Today's Date _____

Course bookings will be confirmed when payment is received.

Method of Payment (Please Circle) Cheque Direct Deposit Credit Card

Direct Deposit Details:

Commonwealth Bank
 BSB: 062320 Account No. 1016 5696
 Name: The Accolade Group

Credit Card Details:

Visa Mastercard

Card Number

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Amount _____ Expiry Date: _____

Name on Card: _____ Signature: _____

Please Note:

The training course fee must be paid **prior** to the commencement of the course. The attendees place on the course will only be confirmed on receipt of payment.

Cancellation:

Attendees must provide at least 5 working days notice, prior to the course commencing, of cancellation of their booking. Cancellations received less than 5 working days prior to the course commencing will not receive any refund. At Accolade's sole discretion, a place on the next available training session may be offered at a reduced fee to attendees that are forced to cancel within 5 working days of the course commencing.

Please return this form via mail, fax or email as per details below.

We look forward to seeing you on the course!

When it comes to **Business**
Accolade has you covered

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