

ENROLMENT FORM FOR WORKSHOPS

A signed copy of this enrolment form and booking details form must be posted, faxed or emailed to Hendersons.

PARENT / GUARDIAN DETAILS *(please print)*

Title..... First Name Surname

Address Suburb Post Code

Phone (Home) Phone (Business) Mobile Phone

(During workshop hours)

Email

STUDENT DETAILS *(please print)*

First Name Surname

Current Year Level..... Date of Birth /..... /..... male female

Please detail any food that your child should not eat (medical reasons only)

.....

Please list any medical conditions we should know about

.....

Terms And Conditions

1. We reserve the right to cancel or reschedule any workshop where there are not sufficient bookings.
2. If a student cancels or changes for any reason, a refund will be made depending on when the cancellation or change was received. Cancellation charges will be assessed as follows:
 - 3 or more days prior to workshop : Full refund or transfer to another class
 - 2 or less days prior to workshop : 50% cancellation fee for that days workshop
3. It is the responsibility of parents/guardians to ensure that staff can contact them easily during all sessions.
Please make sure that we have a phone number for you on the day of any session attended.
4. It is the responsibility of parents to advise Hendersons of any foods a child should not eat or medical problems.

Hendersons Educational Services Pty Ltd materials, including workbooks and practice exams, are protected by the Copyright Laws of Australia. All rights are reserved. No material may be reproduced, photocopied or used by any person other than the original client.

© Hendersons Educational Services Pty Ltd 2016

I have read, and acknowledge, these conditions of enrolment above and in the Information Booklet or from the internet.

Signed Date /..... /.....

BOOKING DETAILS- YEAR 8 & 9 WORKSHOPS

HALF DAY WORKSHOPS			Cost
Creative Writing (2 half days)	<input type="checkbox"/> am <input type="checkbox"/> pm	Date (1)..... Date (2)	\$ 310
Analytical Writing (2 half days)	<input type="checkbox"/> am <input type="checkbox"/> pm	Date (1)..... Date (2)	\$ 310
Maths (4 sessions)	<input type="checkbox"/> am <input type="checkbox"/> pm	Date (1)..... Date (2)	\$ 620
		Date (3)..... Date (4)	
Science Reasoning (1 half day)	<input type="checkbox"/> am <input type="checkbox"/> pm	Date	\$ 155
Abstract Reasoning (1 half day)	<input type="checkbox"/> am <input type="checkbox"/> pm	Date	\$ 155
WHOLE DAY WORKSHOPS			Cost
Reading	Date		\$ 290
Numerical Reasoning	Date		\$ 290
Verbal Reasoning	Date		\$ 290
PRACTICE EXAMS [Exam Type = ACER, AAS, Edutest, Scotch, SHS or JMSS]			Cost (see page 27 for details)
Date	<input type="checkbox"/> am <input type="checkbox"/> pm	Exam Type	\$ 0
Date	<input type="checkbox"/> am <input type="checkbox"/> pm	Exam Type	\$ 155
Date	<input type="checkbox"/> am <input type="checkbox"/> pm	Exam Type	\$ 0
Date	<input type="checkbox"/> am <input type="checkbox"/> pm	Exam Type	\$ 155

BOOKING BONUS : Free Essays Free Prac

TOTAL COST

\$

Verbal Reasoning Paper (Scotch) \$25

PAYMENT INFORMATION

CREDIT CARD DETAILS	<input type="checkbox"/> Visa <input type="checkbox"/> Mastercard	AMOUNT ENCLOSED TODAY	\$
Card Number			
Cardholder's Name:..... Expiry Date			