

# Registration Form

## CONTACT DETAILS

Title: \_\_\_\_\_ First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Company/School: \_\_\_\_\_

Address: \_\_\_\_\_

Suburb: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

## GROUP DETAILS

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Email: \_\_\_\_\_ Mobile: \_\_\_\_\_

Job Title: \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Email: \_\_\_\_\_ Mobile: \_\_\_\_\_

Job Title: \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Email: \_\_\_\_\_ Mobile: \_\_\_\_\_

Job Title: \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Email: \_\_\_\_\_ Mobile: \_\_\_\_\_

Job Title: \_\_\_\_\_

(More Group Details on page 2 and 3 if needed)

## COURSE DETAILS

Name of Course(s): \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_ Date: \_\_\_\_\_

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I/We accept the Training Terms and Conditions.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

## GROUP DETAILS (continued)

First Name:		Last Name:	
Email:		Mobile:	
Job Title:			

  

First Name:		Last Name:	
Email:		Mobile:	
Job Title:			

  

First Name:		Last Name:	
Email:		Mobile:	
Job Title:			

  

First Name:		Last Name:	
Email:		Mobile:	
Job Title:			

  

First Name:		Last Name:	
Email:		Mobile:	
Job Title:			

  

First Name:		Last Name:	
Email:		Mobile:	
Job Title:			

  

First Name:		Last Name:	
Email:		Mobile:	
Job Title:			

  

First Name:		Last Name:	
Email:		Mobile:	
Job Title:			

  

First Name:		Last Name:	
Email:		Mobile:	
Job Title:			

  

First Name:		Last Name:	
Email:		Mobile:	
Job Title:			

## GROUP DETAILS (continued)

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Email: \_\_\_\_\_ Mobile: \_\_\_\_\_

Job Title: \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Email: \_\_\_\_\_ Mobile: \_\_\_\_\_

Job Title: \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Email: \_\_\_\_\_ Mobile: \_\_\_\_\_

Job Title: \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Email: \_\_\_\_\_ Mobile: \_\_\_\_\_

Job Title: \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Email: \_\_\_\_\_ Mobile: \_\_\_\_\_

Job Title: \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Email: \_\_\_\_\_ Mobile: \_\_\_\_\_

Job Title: \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Email: \_\_\_\_\_ Mobile: \_\_\_\_\_

Job Title: \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Email: \_\_\_\_\_ Mobile: \_\_\_\_\_

Job Title: \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Email: \_\_\_\_\_ Mobile: \_\_\_\_\_

Job Title: \_\_\_\_\_

## Training Terms and Conditions

The following terms and conditions apply to all training courses offered by ICTE Solutions Australia.

### Fees

Fees must be paid on enrolment.

If an approved Purchase Order is provided, an invoice will be issued by ICTE Solutions Australia for open program enrolments and must be paid no later than 14 days following the date of the invoice. If the fees have not been paid within 14 days an enrolment may be cancelled. An enrolled participant will be notified prior to this occurring.

Enrolments made within 14 days of the first attendance day will only be accepted with payment.

Payment can be made via electronic funds transfer.

### Cancellations, Refund Policy, Transfers to Alternate Programs

Notifications of cancellations, refunds and requests for transfers must be made in writing to [info@ictesolutions.com.au](mailto:info@ictesolutions.com.au).

#### More than 10 working days from program commencement

In the event of a cancellation the ICTE Solutions Australia will refund the fees paid in full if ICTE Solutions Australia is advised in writing of a cancellation more than 10 working days prior to the program commencement date.

#### 10 working days or less from program commencement

In the event of notification of a cancellation 10 working days or less before the program commencement date fees paid will not be refunded or allocated to another program. ICTE Solutions Australia cannot accept responsibility for changes to work commitments or personal circumstances within this 10 working day period.

### Transfers

Requests for transfers to alternate programs can be arranged if ICTE Solutions Australia is advised in writing to [info@ictesolutions.com.au](mailto:info@ictesolutions.com.au) more than 10 working days prior to the program commencement date and there is availability on the selected program. One transfer will be accepted without charge where ICTE Solutions Australia has been notified in writing at least 10 working days prior to the scheduled commencement date.

### Non Attendance (No Show)

If a participant fails to attend a program, program fees will not be refunded or allocated to another program.

### Substitutions

Requests for substitutions are to be made in writing to [info@ictesolutions.com.au](mailto:info@ictesolutions.com.au) and can be made at any time up to 2 working days before the program commencement date.

### General

- ICTE Solutions Australia reserves the right to cancel, postpone or reschedule programs due to low enrolments or unforeseen circumstances. Where a fee refund is due to a participant such refund will be processed within 30 days.
- The information provided by ICTE Solutions Australia was correct at the time of publication but may be subject to change. ICTE Solutions Australia reserves the right to change program fees, dates, content, speakers or method of presentation at its discretion.
- ICTE Solutions Australia reserves the right to video and/or audio record learning sessions for quality assurance purposes and to support participants.

## **Terms and Conditions (continued)**

### **Special Circumstances**

ICTE Solutions Australia will review its refund policy in cases of special circumstances.

Special circumstances include:

- Medical circumstances: where a participant's medical condition has changed to such an extent that he or she is unable attend, or
- Family/Personal circumstances: death or severe medical problems within a family, so that it is unreasonable to expect a participant to attend, or
- Evidence sufficient for a claim of special circumstances shall include (but is not limited to) the following:
  - In respect to medical circumstances, the provision of a medical certificate from a medical practitioner
  - In respect to family/personal circumstances, a statutory declaration witnessed by a Justice of the Peace, and where family medical problems are cited, a copy of a medical certificate from a medical practitioner

ICTE Solutions Australia will be satisfied that a participant's circumstances are beyond the participant's control if a situation occurs that a reasonable person would consider is not due to the person's action or inaction, either direct or indirect, and for which the participant is not responsible. The situation must be unusual, uncommon or abnormal.