



ENROLMENT FORM - ITALIAN LANGUAGE CLASSES 2019

Term 2: 29 April to 28 June

Enrolment Dates: Tuesday 23rd and Wednesday 24th of April: 10am – 12pm

Please print clearly

Title _____ Given Name _____ Surname: _____

Address: _____ Mobile: _____

Ph: _____ Fax: _____

Suburb: _____ Postcode: _____ Email: _____

How did you hear about the Dante Alighieri Classes? _____

Please enrol me in the following class: (Please circle)

Mon Tue Wed Thurs Sat Time: _____ (Level): _____

Class Fee: \$180.00 per term (All levels) or \$450.00 for the three remaining terms with discount

Payment Options (please indicate your preference):

- By **direct transfer** to: Dante Alighieri Soc., BSB: 036 004, Account #: 100 791
- By **cash** or **cheques** in person at Dante House Tuesdays and Thursdays between 10.00am and 12.00pm,

Quote your full name on the banks' reference line & print a copy of your bank receipt. Please attach it to this form.

To confirm this enrolment please sign to accept the terms and conditions of enrolment:

Refund Policy: A student is entitled to a full refund of fees where:

- A course is cancelled or re-scheduled to a time unsuitable to the student.
- A student is not given a place due to the class being full.

NOTE: Some exceptional cases for refund will be considered at the discretion of the Society. The Student will incur a \$48.00 administrative fee per term, plus \$20.00 for each lesson attended.

Signed: _____
Student Date Enrolling Officer (Print name)

2019 Terms - Term 2: 29 April - Term 3: 22 July - Term 4: 14 October

Office Use Only: Pymt Rcvd: \$ _____ Receipt #: _____ Processed by: _____ Date: ____/____/____

Cheque Cash Bank Deposit – Deposit date ____/____/____

Comments: _____