



***Dante Alighieri Society of Western Australia Inc.***

*ABN: 71 902 671 056*

*Address: 3/239 (rear) Fitzgerald St, West Perth 6005*

*Tel: 08 9328 8840*

*Email: info@dantewa.com.au*

*Website: www.dantewa.com.au*



**Enrolment Form - Conversation Group - 2019 Term 4**

Saturday 19th October - Saturday 14th December

Dante Alighieri Society: 10.30am - 11.30am

Surname: \_\_\_\_\_ Name: \_\_\_\_\_

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

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

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

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

**Fee: Members \$40/ Non Members \$50**

*Payment options:*

1. Cash or Cheque in person at Dante office Tuesdays and Thursdays 10am to 12pm
2. Direct Transfer to the Dante Alighieri Society BSB 036004 A/C 100 791  
(Please quote full name as reference, email or print a copy of receipt and attach to this form)

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

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

*If you would like a receipt please tick*

Office Use Only:

CHEQUE

CASH

DT DEPOSIT

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

Paid: \$ \_\_\_\_\_

Receipt #: \_\_\_\_\_

Processed by: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_