



# ENROLMENT FORM

Artsworx, University of Southern Queensland  
Toowoomba Queensland 4350 Australia  
Phone: +61 7 4631 2755  
www.usq.edu.au/mcgregor

**MAIL** OR **FAX**  
Return completed form to:  
USQ McGregor Schools  
Artsworx, USQ, West Street  
Toowoomba QLD 4350

Fax completed form to:  
(credit card payment only)  
to: **Australia**  
+61 7 4631 1212

(Office Use Only)	0	0	0	9						
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## PERSONAL DETAILS

First Name \_\_\_\_\_ Surname \_\_\_\_\_ Name Tag Name \_\_\_\_\_

Dr/Mr/Mrs/Miss/Ms \_\_\_\_\_

Sex M/F  Date of birth  /  /  OR Age Group 18-25  25-35  35-50  50-60  Over 60

Address \_\_\_\_\_  
Postcode \_\_\_\_\_

Phone Numbers: Daytime  Mobile  Fax

Email

Next of Kin \_\_\_\_\_ Contact No. \_\_\_\_\_

## ENROLMENT

	Class Selection
1st CHOICE	
2nd CHOICE	

Do you require a Statement of Attendance? Yes  No

FEES AND PAYMENT OPTIONS Choose ONE option only.	
<b>Payment Option 1 – Standard (before 31/7/09)</b> \$100 Non-refundable Deposit – Balance due <b>28/8/09</b>	\$100 <input type="checkbox"/> (Bal: \$549)
<b>Payment Option 2 – Earlybird Special</b> Payment IN FULL and enclosed with Registration. <b>Offer closes 31/7/09</b>	\$616 <input type="checkbox"/>
<b>Payment Option 3 – Friends of McGregor</b> \$100 Non-refundable Deposit – <b>Offer closes 28/8/09</b> – Balance due <b>31/7/09</b>	\$100 <input type="checkbox"/> (Bal: \$516)
<b>Payment Option 4 – Late enrolment (after 28/8/09)</b> Payment IN FULL and enclosed with Registration.	\$649 <input type="checkbox"/>

I am a financial member of Friends of McGregor  Yes  No (please tick)

Should medical, hospital or ambulance expenses be incurred on my behalf during the School, I agree to accept and pay all costs, and to exonerate McGregor Schools from responsibility in this regard. (Please note any conditions the School needs to be aware of overleaf)

I declare that I have read and understood the conditions of enrolment and enclose payment

\_\_\_\_\_  
Student's signature

OFFICE USE: RECEIPT

\_\_\_\_\_

## PAYMENT

**PAYMENT BY CHEQUE, BANKCHEQUE, MONEY ORDER OR CREDIT CARD MUST BE PROVIDED BEFORE ENROLMENT CAN BE PROCESSED**

Enclosed please find my cheque/money order for \$

(Cheques should be made payable to USQ McGregor Schools)

OR Please debit my:  Viscard  Mastercard

for the amount of \$

(Card Number)

Cardholder's name (please print)

(Expiry date)

Cardholder's signature only

What is your level of skill:

Intermediate

Advanced

**PREVIOUS EXPERIENCE:**

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**MEDICAL CONDITIONS:** Please give details of any pre-existing medical condition the School should be aware of in the event of an emergency.

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