

Enrolment Form



(when completed this form is a TAX INVOICE)

RMA Training Pty Ltd ABN 15 141 069 1192

Level 3, 83 York St
Sydney NSW 2000

admin@rmatraining.com.au

Tel: 02 8006 0146
Mob: 0402 073 076

Fax: 02 9475 1192

I wish to enrol in the online workshops that I have chosen below:

(All times are in Australian Eastern Standard Time)

Friday, 21 May 2021

Time (AEST)	No.	Workshop name	Points	Price GST inc.	Select
12:15 – 2:15	WK585	PIC 4020	2	\$80.00	<input type="checkbox"/>
2:15 – 2:30	BREAK				
2:30 – 4:30	WK887	Family violence provisions	2	\$80.00	<input type="checkbox"/>
4:30 – 5:30	WK1215	Tips for handling difficult clients	1	\$40.00	<input type="checkbox"/>
Saturday, 22 May 2021					
12:15 – 1:15	WK206	Identifying ethical issues (mandatory)	1	\$40.00	<input type="checkbox"/>
1:15 – 2:15	WK1216	What to do when things go wrong	1	\$40.00	<input type="checkbox"/>
2:15 – 2:30	BREAK				
2:30 – 5:30	WK359	Merits review in the MRD	3	\$120.00	<input type="checkbox"/>
Totals					inc. GST

Important information: RMA Training may vary this program at any time, including by way of re-scheduling or cancellation. It is not the intention of RMA Training or of any presenter or employee of RMA Training to establish a professional/client relationship with any person attending these workshops, or to give legal or professional advice to any person. It is the responsibility of all attendees to satisfy themselves that any or all of the workshops are appropriate to be claimed for continuing professional development purposes.

Privacy: Any information collected on this form will be used solely for the purposes for which it is given or otherwise permitted or required by law, including referral to the Office of the MARA for completion of CPD attendance records.

Payment acceptance: By completing and sending or delivering this form to RMA Training Pty Ltd you authorise payment of the full amount shown.

REGISTRATION DETAILS AND PAYMENT

MARN (if applicable)	Full name		
Business name			
Mailing address			
Tel	Mobile	Fax	
Email			
Payment method:	Credit card:	Visa <input type="checkbox"/>	Mastercard <input type="checkbox"/> Amex <input type="checkbox"/>
I authorise payment to RMA Training Pty Ltd of the sum of		\$	
Card number	CCV or security number		
Expiry date (mm/yy)	Name on card		
Signature		

Print form and fax to 02 9475 1192, or email to admin@rmatraining.com.au (posted forms not acceptable due to Covid-19 restrictions)

You will be contacted by email with instructions to register and join the workshops you have chosen.

By sending this form you authorise RMA Training Pty Ltd to charge the sum shown to your credit card