



ABN: 69 130 594 302

'An Introduction To Working With Individuals Who Self-Abuse'

Workshop Registration

Name of Organisation: _____

Address: _____

City: _____ Postcode: _____

Contact Person: _____ Telephone: [] _____

Email: _____

Launceston / Hobart - TAS
[Please highlight preferred workshop location]

We wish to register the following participants for the above workshop.

Name	Email or Telephone Contact Details

*** You can type directly into this electronic Registration Form. Remember to delete the lines after each heading as you add your details, save it and email it back to safeinoz@wideband.net.au Once received, a place will be secured in the workshop and a Tax Invoice will be generated and emailed back to you for payment.

I have enclosed a cheque for \$ _____ [non-refundable] made out to **SAFE in Oz Pty Ltd** being the total payment for _____ workshop participants @ **\$395.00** each or direct deposit to:-

Direct Deposit Information: To be deposited **prior** to workshop please.

Bank: MECU **Account Name:** SAFE in Oz

BSB: 803 140 **Account Number:** 23186826

If paying by direct deposit, please use our Tax Invoice number in the Transaction Description when Direct Crediting Funds.

Cheques to be attached to a copy of the registration form and forwarded to SAFE in Oz - PO Box 19 Foster Vic 3960.

On receipt of a registration form, a place/s will be secured in the workshop and a tax invoice will be generated for payment. Once payment is received, a Confirmation of Registration & Receipt will be emailed to you and will include all the required information for you to attend the workshop. So pop the dates in your diary and we will see you there.