

Registration Form
Professional Certification Training
April 8, 2010 in Auckland

Name: _____

Organisation: _____

Address: _____

Phone: _____ Mobile: _____

Email: _____

Payment: Please pay NZ\$685 via Credit Card

Credit Card Card No.: _____
Exp.: _____
Name on Card: _____
Card Type: _____

Note: Credit card will be charged A\$ equivalent of NZ\$ 685
(Your bank may also charge you a currency conversion fee)

Please fax form to: **+61 2 9416 3099**, or
scan it and email to: **info@fastforword.com.au**

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Lindfield, N.S.W 2070
Ph: + 61 2 84674809

- You will receive confirmation of registration and payment •

