



# Science Teachers' Association of NSW Inc.

## COURSE REGISTRATION FORM

Confirmation of registration will be sent via email so please provide personal email below.

**Please complete this form by ticking applicable boxes and entering the required information.**

- Event**  Early Career Teachers Course (ECT)  OTHER.....
- Status**  Non Member  STANSW Member Office Use .....
- Proficient Accreditation **NESA Number** .....

### Course Fees

Full Course - \$510.00 (Member), \$630.00 (Non-Member) **OR**  
 Single Day - \$200 (Member), \$240.00 (Non-Member)  
 Single day \$80 (Student Member\*) to qualify, please apply for STANSW student membership\*

2017 Course Dates (refer to website for up-to-date info) – **please tick** sessions you wish to attend

<b>Session 1: all day</b>	<b>Session 2: all day</b>	<b>Session 3: all day</b>	<b>Session 4: all day</b>
<b>Term 1 (17 Mar)</b>	<b>Term 2 (5 Jun)</b>	<b>Term 3 (4 Sep)</b>	<b>Term 4 (27 Nov)</b>

### 4. Participant information

I acknowledge and consent to providing my information to event partners to promote news, information and products. Please tick box if you do not wish to receive promotional information from this event.

Title (Mr/Mrs/Ms/Dr/other) \_\_\_\_\_ Surname \_\_\_\_\_ First name \_\_\_\_\_  
 School \_\_\_\_\_  
 Address \_\_\_\_\_  
 Suburb \_\_\_\_\_ State \_\_\_\_\_ Post code \_\_\_\_\_  
 Day time telephone \_\_\_\_\_ Email \_\_\_\_\_

### 5. Payment details (Please send completed form with payment via fax, post or email)

STANSW Inc PO Box 458 Strathfield NSW 2135 FAX: (02) 9763 2739 or Email: [office@stansw.asn.au](mailto:office@stansw.asn.au)

Cheque attached for \$\_\_\_\_\_ made payable to STANSW Inc.

Direct deposit payments via EFT \$\_\_\_\_\_

BSB: 032003 Acc#: 810494 Account Name: Science Teachers Association of NSW. In the transaction descriptions please include your FULL NAME. Once payment has been made please send/email payment receipt

Charge \$\_\_\_\_\_ to my:  VISA  MasterCard

Card Number: \_\_\_\_\_ \ \_\_\_\_\_ \ \_\_\_\_\_ \ \_\_\_\_\_ Expiry Date: \_\_ \ \_\_

Name on card \_\_\_\_\_ Signature \_\_\_\_\_

**All rates include 10% GST. Please consider this form a tax invoice once you have paid. ABN: 44 677 048 086**

### CANCELLATION POLICY:

Registration is confirmed as soon as your booking form has been received by STANSW. You are required to notify STANSW of applications that are incorrect or made in error. You are also required to advise STANSW if you wish to cancel your own registration.

All cancellations must be made in writing. All cancellations will incur a service fee, if made 3 or less days before an event. As an alternative to cancellation, registration may be transferred to another person without penalty, if made 3 days before the event.

No refunds will be given, and a tax invoice will be issued if STANSW is not notified of the cancellation or the registrant does not attend on the day without having advised STANSW office.

All cancellations and substitutions must be made in writing to: STANSW, PO Box 458 Strathfield NSW 2135 or [office@stansw.asn.au](mailto:office@stansw.asn.au) Strictly no cancellations will be taken over the phone.