

Application and Tax Invoice for Six Sigma Training Programs

*Please indicate the Six Sigma Program you wish to register in

ABN: 37 191 313 308

PERSONAL DETAILS

DR. MR. MRS. MS. FAMILY NAME

GIVEN NAME(S)

TELEPHONE

MOBILE

FACSIMILE

WORK EMAIL

HOME EMAIL

MAILING ADDRESS

EMPLOYMENT DETAILS

EMPLOYER

ABN

POSITION / TITLE

EMPLOYER'S ADDRESS

WWW.

PAYMENT DETAILS

*SIX SIGMA PROGRAM

COURSE ADVERTISED COST \$

CHEQUE MAKE CHEQUE PAYABLE TO UNIVERSITY OF SOUTH AUSTRALIA

CREDIT CARD PLEASE COMPLETE THE AUTHORITY BELOW

VISA MASTERCARD

CARD NUMBER _____ EXPIRY DATE ____/____

CARDHOLDER'S NAME

SIGNATURE



Training Partner of ASQ



PLEASE FORWARD APPLICATION WITH PAYMENT TO:
SANDRA WALKER
STRATEGIC PARTNERSHIPS, UNIVERSITY OF SA,
GPO BOX 2471, ADELAIDE, 5001.
FAX (08) 8302 0805
EMAIL Sandra.Walker@unisa.edu.au

Cancellation Policy: The University of South Australia reserves the right to cancel events and issue refunds. In the event that an attendee cannot attend, a substitute is welcome to attend in their place. No refunds will be given unless 14 days notice is given in writing prior to the date of the planned event.