



Australian College of Training REGISTRATION FORM 2009 FOOD SAFETY AUDITOR

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Please register me in the following Food Safety Auditing workshops (Tick):

<input type="checkbox"/>	FDFFSACA Assess Compliance with Food Safety Programs (Internal Auditing)	1-2 September 2009	\$560.00
<input type="checkbox"/>	FDFFSCHZA Identify, evaluate & control food safety hazards	3-Sep-09	\$560.00
<input type="checkbox"/>	FDFFSCOMA Communicate & negotiate to conduct food safety audits	9-10 September 2009	\$280.00
<input type="checkbox"/>	FDFFSFCSAA Conduct food safety audits	17-18 September 2009	\$560.00
<input type="checkbox"/>	All of the above 4 auditing units (discount of 7%)		\$1,820
<input type="checkbox"/>	Student Enrolment Fee (compulsory)		\$45.00
<input type="checkbox"/>	RABQSA Examination & Certificate (Optional) **		\$75.00

** Examination and Certificate for RABQSA Certification only eligible to students completing all four units.

Student Surname	First Name	Position	Cost
Student Enrolment Fee (this must be included in your payment)			\$45.00
RABQSA Examination & Certificate (Optional)			
Total Cost:			

Contact Name/
Company:

Invoice to:

Address:

City:

Postcode:

Telephone:

Fax:

Email:

Payment Details:

Confirmation of your registration will be given when full payment is made.
Please note - full payment is required prior to commencement of the workshop.

I have enclosed a cheque for \$_____ payable to "Australian College of Training"

I will pay by credit card

Visa

Mastercard

Card Number: _____ Expiry Date: _____

Name on Card: _____ Signature of Card Holder: _____

I will direct debit to your account:

Account Name: Australian College of Training
Bank: ANZ Branch: Bull Creek
BSB: 016-268 Number: 1078 932 91

(Note: Please put your invoice number, surname or company name as a reference)



Please forward an invoice for payment

Purchase Order No: _____