

Please read the section on 'Enrolment Information' for how to enrol

Title (circle one) Mr/Mrs/Miss/Ms

Please print

First Name: _____ Family Name: _____

Address: _____

_____ Postal code _____

Home phone: _____ Mobile: _____

E-mail: _____

Start date	Course Name		Fee

METHOD of PAYMENT:

- DIRECT BANKING ☐

Account Number: 03-0855-0333804-00

Reference: ACE, course name and your name

- CASH ☐ CHEQUE ☐

- CREDIT CARD Visa * ☐ or MasterCard* ☐

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Expiry Date of Credit Card: _____