

Enrolment Form – NSW Real Estate CPD Program

Separate form to be used for each student. Upon payment please treat this form as a tax invoice. ABN 54 089 002 371

Personal Details

Title: Mr Mrs Ms Miss

First Name: _____ (This is the name that will be printed on your certificate)

Last Name: _____

Job Title: _____ Company: _____

Tel: (w) _____ (h) _____ (m) _____ Fax: _____

Email: _____ Date of Birth: _____

Kaplan Student ID: _____

Name of Agency: _____ Name of Training Manager: _____

Certificate/Licence Number: _____ Certificate/Licence Expiry: _____

Program Delivery Details (must be daytime delivery address and will be used for all correspondence)

Address: _____

Suburb: _____ State: _____ Postcode: _____

Enrolment Cost

NSW Real Estate CPD Program			
	Item Number	Price	Total \$
eLearning Program - Premium Package	1529301	\$145	
eLearning Program - Standard Package	1534201	\$99	
eLearning Topic			
			Total AUD\$

Terms of Enrolment

Students are required to read the Kaplan Professional Study Policies which can be downloaded from the Kaplan Professional website www.kaplanprofessional.edu.au. The signature below constitutes acceptance of the enrolment conditions and confirmation that all details provided at the time of enrolment are true and accurate. I agree to notify Kaplan Professional if any details on this enrolment form change. The price quoted is valid till 31 December 2010.

Signature: _____ Date: _____

Payment Details

Cheque (Please make cheque payable to **Kaplan Education Pty Ltd**) Mastercard Visa Amex (2.5% surcharge)

Card Number _____ Expiry Date ____ / ____ Total \$ _____

Cardholder's Name _____ Cardholder's Signature _____

OFFICE USE ONLY

Reference: _____ Date: _____ Salesperson: _____

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