

FRIENDS of GEELONG BOTANIC GARDENS INC.

ABN: 21 699 253 561 INC NO. A13509G



GEELONG SCHOOL of BOTANICAL ART
APPLICATION for CLASS ENROLMENT

Student Name

Mobile Phone Email

DAY OF CLASSES:	CLASS DESCRIPTION:	PLEASE TICK CLASS:	INDICATE TERM:
Tuesday - Draw 1&2 Fortnightly	Beginners to Intermediates With Amanda Ahmed		
Tuesday - Predominately Watercolour Fortnightly	Beginners to Intermediates With Amanda Blake Sutterby		
Friday - Foundation Class Fortnightly	Beginners to Intermediates With Craig Lidgerwood		
Saturday - Master Class Fortnightly	Advanced to Semi-Professional With John Pastoriza-Piñol		

I understand that this Enrolment Form must be received at the Office of the Friends of Geelong Gardens at least two weeks before the start of the relevant Victorian school term.

PAYMENT OPTIONS FOR THE TERM :

a: Full payment before the first scheduled class for the term

OR

b: Instalments: \$200 before the first scheduled class for the term and balance by the third class.

OR If you know you will be away for some of the classes:

c: Apply for **Part Time** enrolment for term. Payment within one week of approval being granted \$252 (\$282 non-members), refer to Part Time enrolment policy.

Signature.....Date.....

OPTIONAL: include payment for this enrolment:

Amount \$..... Cheque Cash Credit Card: Visa / MasterCard

Name on card Expiry Date /..... CVC

Signature Card Number.....

FOR OFFICE USE ONLY:	Enrolment Received Date:	Database Entry:
a/b: Fees Received \$.....	b: Balance Recieved : \$.....	
c: Student advised of Approval for Part-Time:		
c: Part-Time Fees Received: \$.....		