

Sandybeach Centre Enrolment Form (FFS)



Where did you hear about Sandybeach Centre?

- Sandybeach Centre E-News
 Quick Guide Calendar
 Promotional Flyer
 Facebook/Instagram
 Word of Mouth
 Website
 Existing Participant
 Other (Specify)

| COURSE NAME | COURSE OCCURRENCE CODE(S) – OFFICE USE ONLY |
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| | |

PERSONAL DETAILS

Title Surname (*Legal family name*)
 Given Names (*Legal given names*)
 Address
 Building/Property Name.....Flat/Unit Number.....
 Street Number Street name.....
 Suburb..... State..... Postcode..... Date of Birth / /
 Phone (Home)..... Mobile Email
 Gender: Female Male (Indeterminate/Intersex/Unspecified

POSTAL ADDRESS (IF DIFFERENT FROM ABOVE)

Building/Property Name.....Flat/Unit Number.....
 Street Number Street Name.....
 PO Box or Roadside Delivery Box
 Suburb.....State.....Postcode

EMERGENCY CONTACT (*Required information*)

Name Phone/s Relationship

Do you have a medical condition that may impact on your ability to join this program?
 If yes, please complete our Medical Condition Form, obtained from Reception Yes No

Australian Citizen Permanent Resident Other (Office Use Only - Funding Source Identified)

If you do not wish to receive any marketing communications from us, please tick here Office Use Only

CONDITIONS FOR USE OF PHOTOGRAPHIC, VIDEO, AUDIO AND WRITTEN MATERIALS

Sandybeach Centre requests permission to take photographs, video recordings and audio recordings or to use student work to keep as a record of student participation in a course. From time to time they can be used for publicity including promotional material, display material, on our website, our Facebook page and in Sandybeach Centre publications.

By signing this form, I give permission to have my photograph, video recording, audio recording or any of my work copied to be kept as a record of my participation and (if applicable to the course) as evidence of assessment tasks. I understand that this is a requirement of Accredited and Pre-Accredited Training.

Please tick this box if you **DO NOT** give permission to have your photograph, video recording, audio recording or any of your work copied to be used in publicity for Sandybeach Centre for the purposes described above.

Name Signed Date/...../.....



Sandybeach Centre
Award winning adult education, community services, wellbeing and the arts

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