Registration Form for Live/On Demand Courses

COMPANY DETAILS

Organisation/Firm _____

Postal Address _____

Primary Contact's Details

For payment enquiries. When payment is received the primary contact will be emailed the tax receipt and confirmation of venue, date and time.

Full Name _____

Email Address _____

Phone Number _____

1 Use details from teo.co.nz to help complete form

2 Post, email or fax

COURSE DETAILS #1

Title _____

Type *(circle one: seminar / webinar / webcast)* ***Location (if applicable)*** _____ ***Date*** _____

Attendees - *The attendees will be emailed a course confirmation with further instructions. Registrations will receive an emailed reminder one day prior to the course.*

Full Name _____ *Email Address* _____ *CAANZ/NZLS/TINZ #* _____

Full Name _____ *Email Address* _____ *CAANZ/NZLS/TINZ #* _____

Full Name _____ *Email Address* _____ *CAANZ/NZLS/TINZ #* _____

Full Name _____ ***Free!*** *Email Address* _____ *CAANZ/NZLS/TINZ #* _____

☐ *(Seminars only)* ***Please email me the course materials one week in advance.***
A hardcopy is still provided at seminars. No refunds once you have received course material in advance.

SUBTOTAL $

COURSE DETAILS #2

Title _____

Type *(circle one: seminar / webinar / webcast)* ***Location (if applicable)*** _____ ***Date*** _____

Attendees - *The attendees will be emailed a course confirmation with further instructions. Registrations will receive an emailed reminder one day prior to the course.*

Full Name _____ *Email Address* _____ *CAANZ/NZLS/TINZ #* _____

Full Name _____ *Email Address* _____ *CAANZ/NZLS/TINZ #* _____

Full Name _____ *Email Address* _____ *CAANZ/NZLS/TINZ #* _____

Full Name _____ ***Free!*** *Email Address* _____ *CAANZ/NZLS/TINZ #* _____

☐ *(Seminars only)* ***Please email me the course materials one week in advance.***
A hardcopy is still provided at seminars. No refunds once you have received course material in advance.

SUBTOTAL $

PAYMENT DETAILS

- *Prices include GST. Please note, your registration is not processed until payment has been*

TOTAL $

☐ **Cheque** enclosed (payable to TEO Training Limited)
☐ **Subscriber**
☐ **Direct Credit** to TEO Training Limited, BNZ Invercargill, Account Number 02-0924-0071036-00 (please include your firm name and/or attendee name in the reference or details field)
☐ **Credit Card** (or register instantly online at www.teo.co.nz)

Card Type (please circle) **Visa/Mastercard/Amex/Diners** *Card Number* _____ *Expiry MM/YY* _____

Cardholder's Name _____ *Cardholder's Signature* _____

Refund Policy To receive a full refund, you must advise TEO in writing (email us at info@teo.co.nz or fax us on 03 467 7009) at least two full working days prior to your registered course date, and if you have not received the course material electronically in advance.