

To enroll into a program with the Australian College of Sport & Fitness, please complete the following enrolment form. Please ensure you read and understand the terms & condition of the College.

Course Selection

FLEXIBLE LEARNING COURSES ▶

COURSE FEE



Combined Cert III & Cert IV in Fitness Program

which is a combined delivery and assessment of the:

- Certificate III in Fitness SIS30310
- Certificate IV in Fitness SIS40210

+ upgrade ULTIMATE 'Fitness Experience' Pack

+ upgrade ULTIMATE 'Fitness Mentor' Pack

Other : _____

CLASSROOM LEARNING COURSES ▶

Combined Cert III and Cert IV in Fitness- Fast Track Program

which is a combined delivery of the:

- Certificate III in Fitness SIS30310 – classroom delivery
- Certificate IV in Fitness SIS40210 – distance education

or Certificate III in Fitness SIS30310 (20 weeks)

SYDNEY or PERTH Campus

Term date : _____

Confirm your Personal Information

Name : _____ DOB : _____

Address : _____

Suburb : _____ P/code : _____

Phone : H _____ W _____ M _____

Email : _____

Signature & Acceptance of Course Conditions

It is a condition of enrolment that you have read and understood all the conditions and policies of the College and you agree to abide by them.

Signature : _____ Date : _____

Office Use Tutor _____ Referral _____ D/Base _____ Materials _____

Payment Information

Course fee amount ▶ _____

Payment Plan ▶ Pay in full
 Payment Plan
Deposit to pay = _____
Future Payments = _____

Pay by ▶ Direct Deposit
 Cheque
 Credit card
 Cash

Other information:

Credit Card Payments

Select Credit Card : Visa, MasterCard Name card : _____

Card Number: L L L L - L L L L - L L L L - L L L L Expiry: L L / L L

Signature : _____

Direct Deposit Payments

When making direct deposit add your Full Name as the reference.

Account name : Australian Learning Group Pty Ltd
Account: 1019 8588
BSB: 062 032

Payment Plans

- Step 1 ▶ Pay deposit required to start your program (using methods above)
- Step 2 ▶ The College will send separate information for the direct deposit authorization.

Office Use Payment _____ Receipt _____