

**Sunbury Community Health Centre Inc.
Enrolment Form**

Name: _____ Contact Phone No.: _____ *Day*
_____ *Night*

Address: _____

Email Address: _____

Course /Group/Class Name: _____

Course Date / Start Time: _____

\$10.00 Deposit — cheque () cash () Paid in Full \$ cheque or cash only

S.C.H.C. Record No.:

Conditions of Enrolment:

- It is a S.C.H.C. requirement that all program participants complete all of the Consumer Information Form.
- I understand that to be enrolled in a course, I will be required to pay a non-refundable \$10.00 deposit at S.C.H.C. reception.
- Confirmation of my place will be secured when the balance is paid, no later than one week prior to the commencement date.
- All courses will run according to Program Guide information, S.C.H.C. website or Sunbury *Info* Online.
- Every effort will be made to proceed with courses as advertised. No responsibility is taken for courses cancelled due to unforeseen circumstances and, in this case, all people who have enrolled will be notified.
- Would you like to receive a monthly program update email? **YES / NO**

Signatures: _____ Date: _____

(parent or guardian to sign if under 16)

For more information, contact **9744-4455, Fiona 9744-9564**
or email — admin@sunburychc.org.au / programs@sunburychc.org.au
PO Box 218, Sunbury 3429, 12-28 Macedon Street, Sunbury
Reception Hours: Monday to Friday 8.30 am to 5.00 pm, Wednesdays 8.30 am – 7.00 pm

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