

In-Service Inspection of Low Risk Pressure Vessels Course Enrolment Form

STUDENT DETAILS PLEASE USE BLOCK LETTERS Date of Birth: Student First Name1: 1 Student Surname1: Address1: **Post Code:** Suburb/City: State: Phone: Mobile: Student Email¹: Payment of Fees by: ☐ Student ☐ Company By default, where course fees are paid by the company, course feedback and results may be provided to the student's employer, without prior consent. If you do not wish this to happen please initial the box to the right. ¹ The name and address supplied above will be used for all correspondence including certificates and letters of results. **COMPANY DETAILS** – only required if Company is responsible for payment of fees **Company Name: Billing Address: Post Code:** Suburb/City: State: **Contact Name:** Email: **Email for Invoice:** Telephone: **Company Purchase Order No: (Only for Approved Purchasers)** COURSE DETAILS **Total Course Fees** Venue Course **Dates Payable** i.e. Melbourne or Perth In-Service Inspection of Low Risk Pressure ATTAR Melbourne Vessels I understand the following conditions of enrolment and acknowledge by my signature:-This Enrolment is subject to the scheduled course proceeding. In the unlikely event that this course(s) is cancelled, all monies paid to ATTAR will be refunded in full. I have read and I understand the ATTAR Student Handbook. This course includes ATTAR developed theory and practical exams. I will not be allocated a place on my nominated course(s) until all course forms have been completed and course fees have been paid in full. I acknowledge the pre-requisites for this course as detailed on page 2. **Student Signature:** Date: 1 1



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Student name:	Date of birth:	1 1
PRE-REQUISITE INFORMATION		
It is recommended that attendees have the following prior kn	owledge to get the most out o	f this course:
 Language, Literacy & Numeracy Math – Basic Math Skills including Algebra Materials Technology/Multisector 		
EQUIPMENT		
You are required to supply a copy of AS/NZS 3788 – In servi Candidates are encouraged to provide their own Thicknes		pment
ATTAR have a limited number of units available and these	will be allocated based on e	enrolment order.
I will supply my own Thickness Gauge (Ple	ease tick)	
 The Student listed above hereby declares that: I understand the course pre-requisites listed above I understand this course includes ATTAR developed 		



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St	udent name:		Date of birth:	1	1	
PA	YMENT DETAILS					
Payr	ment of Fees by: (please tick)	☐ Company	☐ Student			
wish	to pay my course fees of \$	<u> </u>				
оу:	(please tick payment method)					
	Company Purchase Order – Only applicable if you are an approved Purchaser . A copy of the Company Purchase Order for the full course fee must be supplied with this Enrolment Form.					
	Name of Account: Account Number: BSB No: Bank: Reference:	Engineering Materials Evaluation F 02-785-2676 083-004 National Australia Bank Ltd SURNAME AND COURSE ABBRE				
Pleas	e forward enrolment and/or notifi	cation of payment to Email: <u>traini</u>	ng@attar.com.au			
	Cheque/Money Order payable to Postal address: 44 – 48 Rocco D					
	Credit Card: Please contact	t our office to provide your credit car	rd details			

Cancellation, Transfer & Refund Policy (Summary):

- For a full refund of fees, all cancellations or transfer requests must be received in writing at least 14 calendar days prior to course commencement.
- b) Any cancellations or transfer requests received within 7 14 calendar days of course commencement will result in an Administration fee of \$250.00 with the balance of fees to be transferred to a future course scheduled no later than 1 year after the original course dates.
- c) Any withdrawal or cancellation within 7 calendar days of course commencement where ATTAR is unable to replace your enrolment (or during the course) will result in forfeiture of all fees
- d) A copy of the full **Cancellation**, **Transfer & Refund Policy** can be downloaded from the download section of www.attar.com.au or by contacting us.

Privacy Statement (Summary): ATTAR recognises that the privacy of customer personal information is paramount. ATTAR manages your personal information in accordance with the National Privacy Principles relevant to our business. A copy of the full **Privacy Policy** can be downloaded in the download section of www.attar.com.au or by contacting the General Manager of NDT and Training.

Before submitting this Course Enrolment Form to ATTAR, please check the following:

- I have signed and dated each page of this Student Enrolment Form
- · I have completed the payment details required
- My Name and Date of Birth are clearly legible

Enrolments cannot be accepted unless all pages have been completed and full payment supplied.

Please forward your completed Enrolment form to - training@attar.com.au