

FEI Course Designers Entry Form

Equestrian Australia
 ABN: 19077455755
 PO Box 673 Sydney Markets
 NSW 2129

FEI COURSE FOR JUMPING COURSE DESIGNERS

Upon payment this form acts as a TAX INVOICE for GST purposes

Website: www.equestrian.org.au/
 Email: amy.mcgregor@equestrian.org.au
 Fax: 02 9763 2466

Please complete this form with payment details to **Pathways Officer – Officials** at the EA National Office.

Deadline for return of this form to EA **2nd March 2020**

Partial refunds will only be granted in extenuating circumstances.

All cancellation requests must be made in writing to **Pathways Officer Officials** at the EA National Office.



COURSE DETAILS:

FEI JUMPING Course Designer In Person Course - All Levels

Date:	31 st March – 2 nd April 2020		
Venue:	Sydney Show Jump Club, Gate 5, Racecourse Road, Clarendon, NSW		
Cost:	\$300.00		
Course Director:	Werner Deeg (GER)	Assistant Director – John Vallance (AUS)	
Details:	This course is for <ul style="list-style-type: none"> • Refresher Seminar for FEI Jumping Course Designers all Levels • Participants will be responsible for their own transport, accommodation and meals outside of the course • Course fees include training resources, morning tea, lunch and afternoon tea. 		

PERSONAL DETAILS:

Name:		
Street Address:		
Suburb:	State:	Postcode:
Email:		
Mobile:	Telephone:	
EA Member No:	FEI Member No:	
Dietary Concerns:		

STATUS OF THE PARTICIPANT (SELECT AN ACCREDITATION AND LEVEL):

<input type="checkbox"/> Course Designer		
<input type="checkbox"/> FEI 1*	<input type="checkbox"/> FEI 2*	<input type="checkbox"/> FEI 3*

PAYMENT DETAILS (PLEASE TICK YOUR PAYMENT METHOD):

<input type="checkbox"/> \$300 – FEI Course Fee	Total \$ _____
<input type="checkbox"/> Cheque: payable to 'Equestrian Australia', posted to PO Box 673, Sydney Markets, NSW 2129	
<input type="checkbox"/> Direct Deposit: Bank: Westpac BSB: 032326 Account No: 108042 Account Name: Equestrian Australia <i>Please print the direct deposit transaction receipt and attach to this completed form and post, fax or email to the EA National Office with this form.</i>	
<input type="checkbox"/> Credit/Debit Card: <input type="checkbox"/> Visa <input type="checkbox"/> Mastercard	
Card No: _____	Signature:
Name on Card: CVV: Expiry Date: /.....	