

FEI Course Entry Form

FEI COURSE FOR VAULTING STEWARDS

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

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

Deadline for return of this form to EA 3rd January 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.

Equestrian Australia
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PO Box 673 Sydney Markets
NSW 2129

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



COURSE DETAILS:

FEI Vaulting Stewards Refresher

Date:	24 th – 25 th January 2020
Venue:	Holiday Inn Sydney Airport, Corner of O’Riordan Street & Bourke Road, NSW 2020
Cost:	\$300.00
Course Director:	TBC
Details:	<p>This course is for</p> <ul style="list-style-type: none">• Refresher Seminar for FEI Vaulting Stewards 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.• A user pays course dinner has been arranged for the Saturday Evening at the Hotel

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"/> Steward		
<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	<input type="checkbox"/> \$ 60 – Course Dinner Friday evening at Hotel	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: /		