




Course Booking Form

Please print  a copy of this page, fill in the details and either post it including the fee to:

Details	
First name:	
Last name:	
* Member No	
Phone:	
Mobile:	
Comments:	



SeniorNet Mac Inc.,
P.O. Box 475,
Christchurch 8140



OR
Scan & Email



bookings@seniormac.org.nz

I / We wish to book the following:
'Course(s)'

Course Description	Date



Signature: _____



Date: _____



Cheque made payable to SeniorNet Mac Inc.

If paying by direct banking, our  Bank Account No is: **02-0816-0376043-00**

(Please add your 'surname' and the learning activity abbreviation(s) shown below:

Course Duration	Abbreviation	FEE
2 x 2hr Sessions	CS2	\$25
4 x 2hr Sessions	CS4	\$40

After banking the course fee, please



treasurer@seniormac.org.nz

Stating that you have made this payment.

OFFICIAL USE ONLY

Received	Paid	Recorded	Confirmed