

# Course Booking & Payment Form



Course Name: **Media 102 – Writing an Effective Media Release (full-day course)**  
 Date of Course: **Tuesday, 11 May 2010**  
 Venue: **Unit 1, 34 Geelong Street Fyshwick Canberra ACT**

Organisation:.....

| Name of Attendee   | e-mail | Phone | Cost     | Credit card fee 5% | Net Cost |
|--------------------|--------|-------|----------|--------------------|----------|
|                    |        |       | \$770.00 | \$38.50            |          |
|                    |        |       |          |                    |          |
|                    |        |       |          |                    |          |
|                    |        |       |          |                    |          |
| <b>Total Cost:</b> |        |       |          |                    |          |

**Please Note:**

- In booking this course you are agreeing to the Terms and Conditions as stated on our website. [www.publicaffairs.com.au/course/cs\\_terms&conditions.html](http://www.publicaffairs.com.au/course/cs_terms&conditions.html)
- Payment will be processed once minimum numbers have been reached.

**Payment Options (please tick one of the following payment options)**

**Payment by Direct Debit:**

Payment made on ...../...../2010

Please pay into St George Account:

|                             |
|-----------------------------|
| Account Name: TPARC Courses |
| BSB 112-908                 |
| Account No. 153 264 761     |

**Payment by Credit Card:** (Please note a credit card processing fee of 5% applies)

- Visa       MasterCard

\*The following information is required for credit card payments and authorisation

Card No:

Name of Card Holder: \_\_\_\_\_ Expiry Date: \_\_\_\_/\_\_\_\_

Signature of Card Holder: \_\_\_\_\_ Phone No: \_\_\_\_\_

Invoice Amount \$ \_\_\_\_\_ plus processing fee of 5% \$ \_\_\_\_\_ **Total Amount \$ \_\_\_\_\_**

**Payment on Invoice:** (Please note immediate payment is required upon receipt of invoice.)

**Send Receipt/Invoice to:**

Name & Title .....

Phone: .....

Organisation/Branch: .....

E-mail address: .....

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**Fax the completed form to: 02 6295 7066**