CONTINUING PROFESSIONAL DEVELOPMENT

Mentor education

SUBSCRIPTION FORM

RG 146 Training Australia

PLEASE COMPLETE AND FAX TO 1300 366 170

1. YOUR DETAILS

TITLE ☐ Mr ☐ Mrs ☐ Ms ☐ Miss DATE OF BIRTH / /

SURNAME FIRST NAME

ADDRESS

POSTCODE

PHONE (W) PHONE (M)

EMAIL

COMPANY POSITION/ROLE

DEALER GROUP ASSOCIATION MEMBERSHIP

2. AREA OF INTEREST

- ☐ Generic Knowledge
- ☐ Insurance
- ☐ Managed Investments
- ☐ Derivatives
- ☐ Superannuation
- ☐ Financial Planning
- ☐ Practice Management
- ☐ Securities
- ☐ Foreign Exchange
- ☐ Other

3. ANNUAL FEE PER ADVISER (GST EXEMPT)

	FEE
☐ Individual - 10 Advisers	$360
☐ 10+ Advisers	$350
☐ 50+ Advisers	$340
☐ 100+ Advisers	$330
☐ 500+ Advisers	$310
☐ 1,000+ Advisers	$290

4. PAYMENT

Please Debit $ _____ from my : ☐ Visa ☐ MasterCard

CARDHOLDER'S NAME

☐☐☐☐ ☐☐☐☐ ☐☐☐☐ ☐☐☐☐

CARD NUMBER

CARDHOLDER'S SIGNATURE EXPIRY / /

☐ A Bank Transfer has been made to:
Name: Mentor Education
NAB BSB: 083-004
ACC: 894048117

☐ Cheque payable to Mentor Education is enclosed.

5. PRIVACY STATEMENT

I understand that Mentor Education (A&NZ) is a Registered Training Organisation [RTO] registered with the Australian Skills Quality Authority [ASQA] and is required to comply with the Privacy Act 1988 and the regulatory guidelines as determined by ASQA in compliance with the National Vocational and Training Regulation Act 2011.

I understand that from time to time Mentor Education is required to provide student and training activity data or reports in accordance with regulatory guidelines, as instructed by its governing registering body or government authority or in compliance with the terms and conditions of contracts for government funded training.

I understand that Mentor Education, the government or relevant authority may use this information to assist in planning, administration, policy development, program evaluation, resource allocation, reporting and/or research activities. For these and other lawful purposes, Mentor Education, the government or relevant authority may also disclose information to its consultants, advisers, various government agencies, professional bodies and/or other organisations.

For more information in relation to how student information may be used or disclosed refer to the Privacy Policy at www.mentoreducation.com.au

6. DECLARATION

I declare that to the best of my knowledge all the information supplied on, and with this enrolment form is true and complete, I agree to abide by the conditions described in the Student Information Guide and in the terms and conditions contained therein.

I consent to:

- The disclosure of personal information as described in the privacy statement.
- Mentor Education emailing me information in relation to its products and services.
- Mentor Education using my course feedback and any content collected during my studies in marketing and course content.

SIGNATURE DATE / /

WHEN COMPLETE

EMAIL
learn@mentoreducation.com.au

POST
with your cheque to:
Mentor Education
Level 2, 349 Collins Street
Melbourne, VIC 3000

FAX
AUS: 1300 366 170
INT: +61 3 9614 1877

Quality System
Quality Endorsed Company