

YOUR creativity starts here...



CREATIVE
INSTITUTE OF AUSTRALIA

ENROLMENT FORM AND TUTORIAL AGREEMENT

First Name: _____ Surname/Family Name: _____ Date of Birth: ___/___/___ Male/Female: ___

Address: _____
_____ Postcode: _____

Ph: (____) _____ Bh: (____) _____ Mobile: _____ Email: _____ @ _____

Emergency Contact: Name: _____ Ph: _____

Please choose your course

COURSE	FEE	TICK
Unit 1. Intro to Creative Imaging	\$950	<input type="checkbox"/>
Unit 2. Natural Light Portraiture	\$950	<input type="checkbox"/>
Unit 3. Intro to Studio	\$950	<input type="checkbox"/>
Unit 4. Studio Lighting for Portraiture	\$950	<input type="checkbox"/>
Unit 5. Advanced Camera Studies	\$950	<input type="checkbox"/>
Unit 6. Commercial Photography	\$1170	<input type="checkbox"/>
Unit 7. Fine Light and Art Photography	\$1080	<input type="checkbox"/>
Unit 8. Photographic Business Studies	\$720	<input type="checkbox"/>

You may choose all units by selecting this box



Discounted full fee applies
\$6950.00

DECLARATION

By signing below I acknowledge that I have read and accepted the information provided by the Institute in the Terms and Conditions as set out on the Institutes website www.urcreative.com.au/termsandconditions

Signed (student) _____ Date ___/___/___

PAYMENT METHODS:

DIRECT DEPOSIT

Name: Creative Institute of Australia Pty. Ltd.
BSB: 083-789
ACC: 836453843
REF: "Your Name"
Bank: National Australia Bank

OR



BANK OR PERSONAL CHEQUES:

Bank or personal cheques made payable to:
Creative Institute of Australia Pty. Ltd.
Send to:
Creative Institute of Australia Pty. Ltd. – Enrolment and Finance Office
64 Walkers Road, Mount Eliza Victoria 3930

OR

CREDIT CARD

Credit Card Payments (VISA or MASTERCARD) (Over the phone or fill in the details below)

Name on Card: _____ Type of Card: VISA  or MASTERCARD 

Card Number: Expiry Date: / Authorisation No:

Amount: \$ _____ Signature of cardholder: _____

CREATIVE INSTITUTE OF AUSTRALIA Pty. Ltd.
Part Time Photography Course 09 Enrolment Form
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F: 1300 25 84 46

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