

Workshops Booking Form



Courses are open to Child Care Centre Licencees and their staff.
Cost includes written material, certificates and light refreshments.

Contact Details

Name: Mr / Mrs / Ms _____

Early Learning Centre Name: _____

Address: _____

Suburb: _____ State: _____ Postcode: _____

Telephone: _____ Fax: _____

Mobile: _____ Email: _____

Session Details:

Session 1: Modern Child Care Award - Your requirements 3.00pm - 5.00pm

Session 2: COAG - Understanding the proposed new changes 6.00pm - 9.00pm

Area	Venue	Date	Session 1	Session 2
Lismore	Lismore Workers Club - 23 Keen St	Tuesday 2nd Feb	<input type="checkbox"/>	<input type="checkbox"/>
Coffs Harbour	Cex Coffs Harbour - Vernon St	Wednesday 3rd Feb	<input type="checkbox"/>	<input type="checkbox"/>
Port Macquarie	Port Macquarie Panthers - 1 Bay St	Thursday 4th Feb	<input type="checkbox"/>	<input type="checkbox"/>
Newcastle	Newcastle Panthers - Cnr King & Union Sts	Friday 5th Feb	<input type="checkbox"/>	<input type="checkbox"/>
Chatswood	Chatswood RSL - 446 Victoria Ave	Monday 8th Feb	<input type="checkbox"/>	<input type="checkbox"/>
Parramatta	Parramatta RSL - Cnr Macquarie & O'Connell Sts	Tuesday 9th Feb	<input type="checkbox"/>	<input type="checkbox"/>
Sutherland	Sharkies - 461 Captain Cook Dve, Cronulla	Wednesday 10th Feb	<input type="checkbox"/>	<input type="checkbox"/>
Liverpool	Liverpool Catholic Club - Cnr Joadja & Hoxton Park Rds	Thursday 11th Feb	<input type="checkbox"/>	<input type="checkbox"/>
Penrith	Penrith RSL - 8 Tindale St	Monday 15th Feb	<input type="checkbox"/>	<input type="checkbox"/>
Petersham	Petersham RSL - 7 Regent Street	Tuesday 16th Feb	<input type="checkbox"/>	<input type="checkbox"/>
Wollongong	Wollongong Master Builders - 61 Church St	Wednesday 17th Feb	<input type="checkbox"/>	<input type="checkbox"/>
Goulbourn	Goulbourn Workers - 236 Auburn St	Thursday 18th Feb	<input type="checkbox"/>	<input type="checkbox"/>

CCNSW Member: **One Session:** \$20 x _____ Attendees = \$ _____ **Both Sessions:** \$35 x _____ Attendees = \$ _____

Non Member: **One Session:** \$40 x _____ Attendees = \$ _____ **Both Sessions:** \$75 x _____ Attendees = \$ _____

Payment Details:

Cheque: Payable to Child Care NSW - PO Box 660, Parramatta NSW 2124

Direct Debit: BSB: 012 437 Account: 108 021 102 Reference: "Company Name" followed by WRKSHP

Credit Card: Visa Mastercard

Name on Card: _____

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Expiry Date: _____ / _____ / _____ **Signature:** _____

A receipt / tax invoice will be sent to the address provided

Signature of Nominated Representative _____

Name: _____ Position: _____

Please note: A cancellation charge of \$50 applies when participants do not attend without giving 7 days notice

Please fax your completed Booking Form to: 1300 557 228