

**TRAINING ENROLMENT FORM**

Course Name	<input type="text"/>	Date	<input type="text"/>
Company Name:	<input type="text"/>	Phone	<input type="text"/>
		TRADESMAN	APPRENTICE
Name	<input type="text"/>	<input type="text"/>	<input type="text"/>
Name	<input type="text"/>	<input type="text"/>	<input type="text"/>

**PAYMENT DETAILS**

FAX OR EMAIL WITH CREDIT CARD DETAILS  
ATTACH CHEQUE TO FORM AND POST TO ADDRESS BELOW

**CREDIT CARD PAYMENT**

TYPE OF CARD:    VISA    MASTER

CARD NUMBER	<input type="text"/>		
EXPIRY DATE	<input type="text"/>	THREE DIGIT SECURITY CODE	<input type="text"/>
NAME ON CARD	<input type="text"/>		

**CHEQUE PAYMENT**

CHEQUE NUMBER

I authorize Diesel Distributors to debit my credit card \$\_\_\_\_\_

PAYMENT WILL BE PROCESSED WITH THIS ENROLMENT FORM

PAYEES SIGNATURE

**OFFICE USE ONLY**

Please circle

**ENROLMENT**

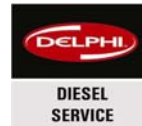
ACCEPTED

STANDBY

FULL

BOOKING NUMBER

RECEIPT NUMBER



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**Postal:**    P/O Box 151 Coopers Plains QLD 4108

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