Purchases

Name			
DOB		Student number	
Phone			
Email			

Purchase item

Please give details about the course you are purchasing.

Course	
Comments	

Student declaration

I agree to purchase this item.

Student's signature ……..Date …….

OFFICE USE ONLY

	Name	Date
Received by		
Money received		
Comments		

RTO 31730
CRICOS 01796F
ABN 86 077 189 5

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