

HOW TO ENROLL

PLEASE READ THIS PAGE VERY CAREFULLY TO AVOID MAKING MISTAKES WHEN FILLING IN AND RETURNING TO SMART BOWEN.

Complete ALL sections of the enrollment form using either black or dark blue pen.

If a question is not applicable to you please indicate by writing N/A in the appropriate box.

The policies and procedures are posted on our website at www.smartbowen.com for you to read through prior to signing your application. They are accessed from the home page via the "Policies" button.

Select the course that you wish to enroll in by placing a tick in the box along side of the description.

Indicate which state or states you are prepared to attend training intensives.

Please ensure that you have signed the form in the appropriate place and designated how payment will be made, before submitting to Smart Bowen Pty Ltd.

All fees and services provided in these training programs are subject to change without notice.

Payment Options

Payment is required at the time of enrolment unless otherwise organized. If enrolling more than 4 weeks prior to a course, the payment options should still be filled in. Smart Bowen reserve the right not to process your application form until the due date.

If you are unsure about how much to pay please contact the Smart Bowen Office for further information on: 03) 5429 2010 or by email: info@smartbowen.com

Payment can be made by cheque, money order, cash, electronic transfer or credit card. Please note that Credit Card payments will incur a 2% charge in addition to the nominal fee.

Cheques are to be made payable to: Smart Bowen Pty Ltd.

Electronic transfers should be sent to the account listed on the payment sheet on page 9.

Please ensure electronic payments show your name for ease of tracking on our statements, and in addition please email - info@smartbowen.com the same day the electronic transfer was made, to confirm the transaction.

Once completed, **post** the enrolment form pages **4 to 7** and payment (if paying by cheque) to:

Smart Bowen Pty Ltd

P.O. Box 198

Lancefield

Victoria 3435

Alternatively you may **fax** your enrolment pages **4 to 7** to: **03) 5429 2022**

Please email info@smartbowen.com the same day of faxing to confirm that your fax was received.



PERSONAL DETAILS

Title Surname

First Name Middle Name

Former Surname (if applicable) Preferred Name

Date of Birth / / Age Gender

HOME ADDRESS

Street City/Town/Suburb

State Post code

POSTAL ADDRESS

Street / P.O. Box No City/Town/Suburb

State Post code

Phone: AH Business Hours Mobile

Email Address Can we contact you regarding your studies via email?

YES NO

DISABILITIES

Do you have any disabilities? (Please tick appropriate box or boxes)

Yes, please indicate below your disability No

Hearing Learning Mobility Vision Medical

Other (Please specify) _____

EQUIPMENT

If enrolling in a Bowen Therapy for People class, are you able to bring a treatment table?

YES

NO

NEXT OF KIN DETAILS

First Name _____ Surname _____

Relationship _____

Phone _____ Mobile _____

Address _____ State _____ Post Code _____

EDUCATION

If you are aged 24 or below at the time of enrolment, please provide your Victorian Student Number, below.

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Yes, I am new to the Victorian Education System, I have never attended a Victorian school, TAFE or other training provider.

What is the highest level of education obtained by you? (Please tick appropriate box or boxes)

- | | |
|---|--|
| <input type="checkbox"/> Completed post-graduate course | <input type="checkbox"/> Completed bachelor level course |
| <input type="checkbox"/> Completed higher education sub-degree course | <input type="checkbox"/> Completed other qualification or competence |
| <input type="checkbox"/> Completed VET / TAFE award course | <input type="checkbox"/> Completed final year of secondary education |
| <input type="checkbox"/> An incomplete higher education course | <input type="checkbox"/> No prior education attainment |

Year last enrolled _____ name of school/higher education provider _____

EMPLOYMENT

Which of the following best describes you? (Please tick appropriate box or boxes)

- | | |
|--|--|
| <input type="checkbox"/> Employee | <input type="checkbox"/> Self-employed |
| <input type="checkbox"/> Unemployed - seeking work | <input type="checkbox"/> Not employed - not seeking work |

What is your current occupation _____

TICK BOX/S FOR COURSE/S OR MODULE OF ENROLMENT

- Bowen Essentials - Introduction / Bowen Therapy for People - (Module 1)
- Bowen Essentials - Home User / Bowen Therapy for People - (Module 1 to 3)
- Certificate IV in Bowen Therapy - (Modules 1 to 5 plus assessment day 1 of Unit 6)
- Diploma of Bowen Therapy - (Modules 1 to 8)
- Advanced Diploma of Bowen Therapy - (Modules 1 to 13)



LOCATION

In which state would you prefer to attend the course? (Please tick the appropriate box)

<input type="checkbox"/> Victoria	<input type="checkbox"/> South Australia	<input type="checkbox"/> Western Australia
<input type="checkbox"/> NSW	<input type="checkbox"/> Queensland	<input type="checkbox"/> Other

Please nominate second state of preference: _____

PRIOR BOWEN THERAPY TRAINING

Have you completed an anatomy and physiology course? (Please tick appropriate box or boxes)

YES NO

Please attach a copy of your certificate of completion or statement of attendance.

List the Bowen Therapy training have you completed and when (date)

1		Date
2		Date
3		Date
4		Date

PRIVACY

In compliance with the Privacy Act (Private Sector) 1998, the information requested on this form will be used for purposes associated with your enrolment only.

POLICY

The Smart Bowen Therapy Policies and Procedures Handbook is available by request from the Smart Bowen Pty Ltd office, or is available at our website: www.smartbowen.com and must be read, understood and accepted at the time of enrolment. The Cancellation and Refunds Policy is repeated below for your convenience.

Cancellation and Refunds Policy

Fees are charged for students withdrawing from a course of study under some circumstances.

3.4 Refunds Policy

- 3.4.1 Smart Bowen Pty Ltd., will refund any fees paid by a student, less a one hundred dollar (\$100.00) administration fee, provided that the student gives notice of their withdrawal from the course a minimum of twenty one (21) days prior to its commencement date.
- 3.4.2 Students withdrawing from a course less than twenty one (21) days prior to the commencement date are not entitled to a refund.
- 3.4.3 Smart Bowen Pty Ltd., will refund any fees paid by a student, less a one hundred dollar (\$100.00) administration fee, when extenuating circumstance prevent the student from attending the course.
- 3.4.4 Smart Bowen Pty Ltd., will refund all fees paid by a student, if the company is unable to provide the training program the student has applied to attend.
- 3.4.5 If a training program is cancelled after it has commenced by Smart Bowen Pty Ltd., students will be refunded any amount that has been paid in advance for modules of the course not yet presented.



DECLARATION

I, _____ hereby declare that:

Please print

1. The information provided in this form is correct and complete.
2. The Smart Bowen Therapy Policy and Procedures have been made available to me and I have read, understood and accepted these conditions of my enrolment.

Students Signature: _____ Date: _____

Please Note: If students are under the age of 18 their parent or guardian need to sign on behalf of the student. Students under 18 are eligible for enrolment in any Smart Bowen program (however conditions apply and Smart Bowen reserve the right to refuse entry).

Parent/Guardian Signature: _____ Date: _____

Relation to: _____ Address: _____

_____ State: _____ Post Code: _____ Ph: _____

Mobile: _____ Email: _____

Cheque	<input type="checkbox"/>	Money Order	<input type="checkbox"/>	Cash	<input type="checkbox"/>	Electronic transfer	<input type="checkbox"/>
To - Smart Bowen Pty Ltd		<u>Bendigo Bank</u>		BSB: 633 000		A/C No: 1300 20472	
Credit Card:	Master Card	<input type="checkbox"/>	Visa	<input type="checkbox"/>	Bank Card	<input type="checkbox"/>	
Card No:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Expiry date:	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>		
Security numbers on rear of card:	<input type="text"/>	<input type="text"/>	<input type="text"/>	Amount \$.....			
<p>All Credit Card payments will incur a 2% charge, I agree to this additional charge and permit Smart Bowen to add this fee to the total.</p>							
Card holder name:							
Signature: Date:/...../.....							
<p>All banking records are shredded after transactions are carried out. Repeat transactions made by credit card need to be authorized by the student.</p>							

Return the completed Registration Form with payment by mail, fax or email

Smart Bowen Pty Ltd
PO Box 198
Lancefield
Victoria 3435
Fax : 03) 5429 2022
E: info@smartbowen.com