

REGISTRATION FORM

WINEMAKER FOR A WEEKEND

**Privacy Statement:**

This form is to gather information about you and your participation in a program offered by the Queensland College of Wine Tourism. We will use this information for program administrative purposes such as issuing certificates of attendance. Information on this form will remain securely stored at the College, and will not be made available to any third party.

Please Note:

- The College may contact you in the future to provide information on upcoming events and learning opportunities.

**Title:**  Mr  Mrs  Ms  Other

**First Name:** \_\_\_\_\_

**Last Name:** \_\_\_\_\_

**Home Address:** \_\_\_\_\_  
\_\_\_\_\_

**Postal Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Mobile:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Special Needs:** \_\_\_\_\_

**Emergency Contact Name:** \_\_\_\_\_

**Emergency Contact Phone:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_

## 2. Course details

**Award:** Winemaker for a Weekend Program (Weekend 1)  
**Date(s):** **Starting:** 24 February 2018 **Ending:** 25 February 2018  
**Location:** Queensland College of Wine Tourism, Stanthorpe  
**Cost:** \$350 per person

## 3. Payment Form

**For Schools/Organisations/Groups Order No:** .....

**For Individuals - Payment required with order Cheque/Credit Card**

- Cash – please pay in person at the college*
- Cheque - Please make cheques payable to 'Queensland College of Wine Tourism' (USQ - A.B.N. 40 234 732 081)*
- Credit card – Please complete the payment form below.*

**Card type (please tick)**     VISA     MASTERCARD

**Name on Card:** .....

**Card No:**

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

**Expiry Date:** month..... year.....    **Amount: \$**.....

**Signature:** .....

**Date:** ...../...../.....