



STUDENT THINKING SKILLS WORKSHOP 2010 REGISTRATION FORM and INVOICE

SCHOOL:	Telephone:
	Fax:
Address:	
	Postcode:
Contact Person: _____ Telephone: _____	
Contact Email: _____	
Preferred Dates and Times (Starting / Ending): Please List 3 options	
1.	
2.	
3.	
Send Registration To: Fax: 9525 7337 Email: wa-director@tom.edu.au	
Or contact Kathy Mobile: 0417 976 894	

WORKSHOP REGISTRATION FEES:

INVOICE

ABN: 68 971 418 993

<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">3 hours</td> <td style="width: 30%;"><u>Up to 20</u> Students</td> <td style="width: 10%; text-align: right;">\$350</td> <td style="width: 30%;"></td> <td style="width: 10%;"></td> </tr> <tr> <td style="text-align: center;">Plus</td> <td>Each student <u>over 20</u></td> <td style="text-align: right;">\$12</td> <td></td> <td></td> </tr> <tr> <td colspan="2"><u>Country Areas</u></td> <td colspan="3">Please Call Kathy: 0417 976 894</td> </tr> </table>	3 hours	<u>Up to 20</u> Students	\$350			Plus	Each student <u>over 20</u>	\$12			<u>Country Areas</u>		Please Call Kathy: 0417 976 894			<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%;">20 Students @ \$350 =</td> <td style="width: 10%; text-align: center;">=</td> <td style="width: 20%; text-align: center;">\$</td> </tr> <tr> <td>_____ extra @ \$12 =</td> <td style="text-align: center;">=</td> <td style="text-align: center;">\$</td> </tr> <tr> <td colspan="2" style="text-align: right;">TOTAL ENCLOSED:</td> <td style="border: 2px solid black; text-align: center; vertical-align: middle;">\$</td> </tr> <tr> <td colspan="2" style="text-align: right;"><small>(TOM WA Inc. is not registered for GST)</small></td> <td></td> </tr> </table>	20 Students @ \$350 =	=	\$	_____ extra @ \$12 =	=	\$	TOTAL ENCLOSED:		\$	<small>(TOM WA Inc. is not registered for GST)</small>		
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Payment Options:																												
Direct Deposit to:		Please make cheque payable to:																										
Tournament of Minds WA BankWest - Mount Lawley Branch BSB: 306-076 Account Number: 419-316-3		<i>Tournament of Minds WA Inc</i>																										
Remittance Advice to: agreenhalgh@amnet.net.au		Send To: TOM Workshops																										
Please indicate your School and reason for the remittance (Workshop Payment) in the advice.		Arnold Greenhalgh – TOMWA Treasurer 13 Glasnevin Court Waterford 6152																										

CANCELLATIONS: Unfortunately NO refunds can be made for cancellations.

ANY QUESTIONS CALL KATHY 0417976894