**The Embroiderers’ Guild ACT Inc**

**PO Box 830**

**DICKSON ACT 2602**

Telephone: 0481 578 789

Email: embroideryactclasses@gmail.com

Website: embroiderersact.org.au

ABN: 85 703 649 421

**CLASS ENROLMENT FORM**

**PLEASE COMPLETE and either POST to** The Treasurer, PO Box 830, Dickson, ACT 2602 **or EMAIL to** embroideryactclasses@gmail.com

**CLASSES COORDINATOR COPY**

Attendee Name………………………………………………………………………………………………………………….

Class Name………………………………………………………………………………………………………………………..

Class Date(s)……………………………………………..Class Time…………………………………………………….

**Contact Details**

Telephone: (H) ……………………………(W)…………………………..Mobile…………………………………..…

Email:………………………………………………………………………………………………………………………………..

Attendee Emergency Contact: Name……………………………………….. Phone……………………………………

Member/Non-Member (Please circle as appropriate)

I will be travelling to this class from outside the immediate

Canberra area Yes/No (Please circle as appropriate)

Class Fee: $……………………………

**Methods of payment**:

🞎Direct Deposit to Bank Account

Account: The Embroiderers Guild ACT Inc

Bank: St George Bank

BSB: 112 908

Account: 040003863

Reference: Members Name C (eg Jo Bloggs C)

🞎Online EFTPOS payment (https://embroiderersact.square.site)

🞎 Credit/ Debit/ EFTPOS only available in office, please see Treasurer

🞎Cash (do not post)

**Office use only: Deposit \_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_ Receipt No \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Balance \_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_ Receipt No \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Full \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_ Receipt No \_\_\_\_\_\_\_\_\_\_\_\_\_\_**