

# FRIENDS of GEELONG BOTANIC GARDENS INC.

ABN: 21 699 253 561 INC NO. A13509G



## GEELONG SCHOOL OF BOTANICAL ART

### APPLICATION for CLASS ENROLMENT

Student Name .....

Mobile Phone ..... Email .....

Contact details in case of emergency:

Contact Name ..... Mobile Phone .....

DAY OF CLASSES:	CLASS DESCRIPTION:	PLEASE TICK:	INDICATE TERM:
Tuesday A Fortnightly	<b>Drawing I and II</b> With Amanda Ahmed		
Tuesday B Fortnightly	<b>Watercolour I</b> With Amanda Ahmed		
Friday morning	<b>Beginners to Intermediates</b> With Dolores Sk-Malloni		
Friday afternoon	<b>Beginners to Intermediates</b> With Dolores Sk-Malloni		
Saturday A	<b>Advanced to Semi-Professional</b> With John Pastoriza-Piñol		
Sunday B	<b>Advanced Beginners, now Intermediates</b> With John Pastoriza-Piñol		
Sunday C	<b>Beginners</b> With John Pastoriza-Piñol		

I understand that this Enrolment Form must be received at the Office of the Friends of Geelong Gardens at least two weeks before the start of the relevant Victorian school term and that full payment is due before the first scheduled class for that term.

.....  
Signature

.....  
Date

**OPTIONAL:** include payment for this enrolment:

Amount \$..... Cheque Cash Credit Card: Visa / MasterCard

Name on card ..... Expiry Date ..... /..... CVC .....

Signature ..... Card Number.....

**FOR OFFICE USE ONLY:**  
Enrolment Received Date: ..... Fees Received \$..... Date..... D/B.....