

ARIMGSAS Physical Examination Workshop - Application Form - \$120

STUDENT ENROLMENT INFORMATION	Student Number:

STUDENT PERSONAL DETAILS

Family Name		AMC ID:			
Given Names					
Preferred Name <small>(if applicable)</small>		Gender <small>(circle)</small>	M / F	Birth Date <small>dd-mm-yy</small>	/ /
Phone		Mobile			
Email Address		Country of Origin			

ADDRESS DETAILS

Residential Address					
Suburb		Post Code			
State		Country			
Postal Address <small>(If Different from Above)</small>					
Suburb		Post Code			
State		Country			

ENROLMENT DETAILS

Workshop Date	<i>Date you wish to start the course</i>
Location	Melbourne

PAYMENT OPTIONS

<input type="radio"/> 1. Credit Card	<p>Name of Card Holder:</p> <p><small>In case a different name on the card, relation to the applicant.....</small></p> <p>Card Number:</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; width: 25%; height: 20px;"></td> <td style="border: 1px solid black; width: 25%; height: 20px;"></td> <td style="border: 1px solid black; width: 25%; height: 20px;"></td> <td style="border: 1px solid black; width: 25%; height: 20px;"></td> </tr> </table> <p>Exp Date: <table style="display: inline-table; border: 1px solid black; width: 60px; height: 20px;"></table> CCV: <table style="display: inline-table; border: 1px solid black; width: 60px; height: 20px;"></table></p> <p style="text-align: right;">Card Holder Signature.....</p>				
<input type="radio"/> 2. Local Bank Transfer	Name: Alan Roberts IMG SAS Bank: WESTPAC BSB: 033-395 Account: 450 188 Reference: <i>Your Name</i>				
<input type="radio"/> 3. International Bank Transfer	Name: Alan Roberts IMG SAS Bank: WESTPAC BSB: 033-395 Account: 450 188 Reference: <i>Your Name</i> International Bank Transfers may apply				
<input type="radio"/> 4. Bank Cheque or Bank Drafts	Payable to Alan Roberts International Medical Graduates Support and Advisory Services P/L				
<input type="radio"/> 5. In Person	EFTPOS Terminal				

All Payments made to Alan Roberts IMG SAS. We do not accept American Express or Diners Club Cards.

HOW DID YOU HEAR ABOUT US?

<input type="radio"/>	<input type="checkbox"/> Facebook	<input type="checkbox"/> Website	<input type="checkbox"/> Newsletter	<input type="checkbox"/> Referral By Whom.....
<input type="radio"/>	<input type="checkbox"/> Brochure	Other		

PLEASE REMEMBER TO READ AND SIGN THE NEXT PAGE THEN RETURN BOTH PAGES

How to apply

Print the enrolment form provided, complete, and send as email attachment to [admin.](mailto:admin<imgaustralia.net.au)

Application Processing and Closure

- The full amount will be deducted on application as fees for the workshop

Fees and refunds

- No refunds will be provided if you cancel your application.
- All fees must be paid in full to confirm your place.

Payments

You can pay with Master card / Visa by submitting this form, or by EFTPOS / Cash at Alan Roberts IMGAS, 3 Bowen Crescent, 3004, Victoria

Enquiries

For all enquiries please email [admin or call +61 3 9867 3344.](mailto:admin<imgaustralia.net.au)

Disclaimer:

- *ARIMGAS works in the best interest for IMG's and ARIMGAS reserves the right to change the pricing for its courses as required
- *ARIMGAS reserves the right to cancel a workshop or course if the course does not meet minimum students required

PRIVACY NOTICE:

ARIMGAS collects personal information from you including your name, date of birth, and contact details. We use this information to provide you with educational and other services requested by you. We do not pass this information to third parties without your consent except where required or authorised by law. You may access your personal information to determine what is being held and to correct the information if it is found to be inaccurate by contacting us.

MEDICAL DISCLAIMER:

Do you suffer from any medical condition? YES / NO

(If yes, please specify details so that we can modify our training and assessment to assist you in completing your training.)

BY SIGNING THIS DOCUMENT, I ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND THE APPLICATION PROCESS

APPLICANT SIGNATURE.