

McKenzie Carrick
Professional Development Program Enrolment Form

Program Name: Treating Attachment Disorders in Adulthood Traumas

Venue and Dates: ☐ **Sydney CBD 6-7 Sep** ☐ **Darwin 31 Aug 31-1 Sep**
(please tick box) ☐ **Melbourne 13-14 Sep** ☐ **Adelaide 5-6 Oct**
 ☐ **Perth 28-29 Sep** ☐ **Brisbane 21-22 Sep**

Participant Name: _____

Organisation: _____

Address: _____

Phone: _____ Mobile: _____

Email Address: _____

Special dietary requirements: _____

Course Fee (GST incl.): ☐ **Early Bird \$660 (paid 2 months prior)** ☐ **Normal \$770**

Payment Method:

For Cheque: please make payable to McKenzie Carrick Pty Ltd and mail to GPO Box 3866, Sydney NSW 2001.

For Direct deposit, our bank account details are:

National Australia Bank BSB: 082 057 Account Number: 895794218
(Please use your surname as payment reference)

For Credit Card, please fill in credit card details:

Type of Credit Card: ☐ Visa ☐ Mastercard Expiry Date: _____

Name of Cardholder: _____

Card Number: _____

Card Verification Number: _____ Debit Amount: _____

Signature of Cardholder: _____

Please return this form by fax or email to office@mckenziecarrick.com.au.

A receipt will be emailed to you upon processing. Note: Attendee withdrawals more than one month in advance attract a processing fee of \$55. No withdrawals are permitted in the month prior to the program; however positions are transferable to anyone you nominate.



**McKenzie
CARRICK**
■ Corporate Psychologists ■

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■ Brisbane ■ Darwin
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