



OLINDA COMMUNITY HOUSE INC.

ABN: 63 299 630 286
Registered No: A0018118Z
Funded by: Dept. of Planning and Community Development
Yarra Ranges Council

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ENROLMENT FORM 2019

NAME: _____ PHONE: _____

ADDRESS: _____

_____ POSTCODE: _____

EMAIL: _____

EMERGENCY CONTACT – NAME AND TELEPHONE NUMBER: _____

NAME OF COURSE(S): 1. _____

2. _____

3. _____

RECEIPT NUMBER: _____

ANNUAL ADMINISTRATION / MEMBERSHIP FEE \$5.00:

RECEIPT NUMBER: _____

How did you hear about the course/activity? (Please circle one)

Program brochure Flyer Newspaper Person Other _____

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