

ENROLMENT FORM

Essential Astrology Course

Please complete this form and post together with your payment to:

P O Box 291 Greenock S A 5360

or email to

astromundi@internode.on.net

Consult the Astro Mundi Course Guide for detailed information on each Unit available at www.astromundi.com

All classes have specific times and dates (please consult the on-line calendar at http://astromundi.com/calendar.html).

All students are provided with tutor support and receive a copy of all Unit lectures via download links.

- * First Class for Astrology 101 6:00pm (ACDT), Thursday 25 February 2021
- * First Class for Astrology 201 6:00pm (ACDT), Tuesday 23 February 2021

*Please Note: All enrolled students will be notified should there be any changes to these dates.

	1	ABOUT YOU		
NAME				
Address				
Town/Suburb				POSTCODE
TELEPHONE	Номе		Work	
EMAIL				

		BIRTH DATA	
This infe	ormation is confidentia	al and will only be used to generate your	horoscope for study purposes.
DATE OF BIRTH	DD	ММ	YY
TIME OF BIRTH		AM/PM	
PLACE OF BIRTH	TOWN/CITY		

COURSES & FEES Please tick (*) your selection All prices include GST	
Astrology 101 Astrology 102 Astrology 201 Fees paid at the beginning of each Unit	Astrology 202 \$790
TOTAL Fees PAYABLE for every Unit (Fees payable one Unit at a time)	\$790

PAYMENT OPTIONS

A \$290 deposit secures your enrolment and the balance of fees can be paid **ON** or **BEFORE** the first class of the Unit.

You may pay your fees in **INSTALMENTS** with an **INITIAL PAYMENT of \$290** with two further payments of \$250 in week 3 and week 6.

Please note that all outstanding fees must be paid before the end of the Unit. Astro Mundi reserves the right to decline enrolments where fees are outstanding from a previous Unit.

YOUR ENROLMENT & PAYMENT DETAILS
Please enrol me as a student in the Essential Astrology Course and I accept the conditions of this enrolment.
I enclose a total of \$
CASH CREDIT CARD CHEQUE MONEY ORDER *ELECTONIC FUNDS TRANSFER
*EFT INFORMATION: BSB 065 520 ACCOUNT NUMBER: 1006 7976 ACCOUNT NAME: ASTRO MUNDI
CREDIT CARD NUMBER
PLEASE CIRCLE CARD TYPE: VISA MASTERCARD
EXPIRY DATE CVV
PLEASE MAKE ALL CHEQUES/MONEY ORDERS PAYABLE TO ASTRO MUNDI PLEASE SEND PAYMENT INFORMATION (EFT NOTIFICATION) AND COMPLETED ENROLMENT FORM TO astromundi@internode.on.net or by post to Astro Mundi P O Box 291 Greenock SA 5360 Australia
SIGNATURE
DATE