

# Mental Health First Aid Training Booking Form



## Enrolment Details

Participant Name: \_\_\_\_\_

Company Name: \_\_\_\_\_

Email Address: \_\_\_\_\_

Business Address: \_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_

## Select Training (Tick preferred date)

Mental Health First Aid Training  25 & 26 October 2022 or

29 & 30 November 2022

## Invoice

Contact Name: \_\_\_\_\_

Company ABN: \_\_\_\_\_

Email: \_\_\_\_\_

Telephone: \_\_\_\_\_

## Please select

\$330.00 (incl GST) MEND MEMBERS

\$363.00 (incl GST) NON-MEMBERS

## Payment Options

### CHEQUE

Mend Services  
PO BOX 132  
GLEBE NSW 2037

### EFT

Mend Services  
BSB: 062 172  
ACC #: 1035 8032

### CREDIT CARD

Credit Card No: \_\_\_\_\_

Expiry Date: \_\_\_\_\_ / 20 \_\_\_\_\_

Name on Card: \_\_\_\_\_

Amount: \$ \_\_\_\_\_

Name on Card: \_\_\_\_\_

Signature: \_\_\_\_\_

To ensure prompt service, please include your company name in the reference line or on the back of the cheque.  
Thank you

FOR MORE INFORMATION, PLEASE CONTACT TINA EMERTON

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