

Kinesiology Schools Australia

K.S.A. Byron Bay
28 Seaview St
Byron Bay, NSW 2481
Phone: 02 6685 7991

Kinesiology
Schools
Australia



ENROLMENT FORM

Course Name: Diploma in Kinesiology – HLT 52415

Venue: Byron Bay

Personal Details

Name: _____

(Title, First Name, Surname Name)

Home Address: _____

Town/City: _____

State: _____ PC: _____

Phone: _____

Mobile: _____

Email: _____

Date Of Birth: ____/____/____ M / F

Emergency Details

Medical Practitioner

Name: _____

Phone: _____

Address: _____

Town/City: _____

State: _____ PC: _____

In case of an emergency I hereby authorise Kinesiology Schools Australia or any member of its staff (including contract staff) to call an ambulance on my behalf and/or send me to the appropriate medical practitioner. I accept that I will be responsible for any costs incurred.

Signed: _____

Employment Details

Current Position: _____

Organisation: _____

Postal Address: _____

Town/City: _____

State: _____ PC: _____

Phone: _____

Email: _____

Next of Kin

Name: _____

Relationship: _____

Phone: _____

Mobile: _____

Address: _____

Town/City: _____

State: _____ PC: _____

Tell us a little about yourself: (Please attach another piece of paper if needed)

Why do you want to do this training? _____

Why do you believe Kinesiology Schools Australia should accept you as a student?

The following is not a prerequisite. It helps the lecturers plan their lessons.

Previous Kinesiology Experience or Training: _____

School level achieved: _____

Other Qualifications: _____

I intend to apply for **Recognition of Prior Learning (RPL)** YES NO (please circle)

If yes, circle all subjects you intend to request an RPL for: A&P 1, A&P301, Clinical Safety, Business Administration, Manage a Business, Mentoring, Research, Communication, Nutrition, Legal Ethics, Diversity

PLEASE NOTE: Completion of the Diploma is dependent on the participant attaining an up-to-date Senior First Aid Certificate. Please contact KSA for more information.

Where did you hear about us?

Internet

Living Now Magazine

Newspapers

Referred by _____

Other _____

Course Payments 2019 - Byron Bay KSA Campus

PLEASE NOTE:

Enrolment will not be accepted unless payment accompanies application form.

Cash / Cheque / Direct Deposit / Internet Banking (please circle):

Option 1, pay \$21,000

2000 Plan - available only when course starts

Deposit \$3,000, 9 payments of \$2,000 bi-monthly.

Option 2, pay \$21,600

600 Plan

Deposit \$1,800, 33 payments of \$600.

Please direct any queries to Veda Turner

02 6685 7991 or byronkinesiology@gmail.com

Payments can be made by:

Cheque: payable to Kinesiology Schools Australia,
28 Seaview St, Byron Bay NSW 2481

Direct deposit at a Commonwealth Bank branch,
BSB 064124, account no. 10211194 – please advise teller to state
your name as reference

Internet banking – Kinesiology Schools Australia, BSB 064124,
account no. 10211194 – please note your name as reference
or call us for an invoice number.

I hereby confirm that to the best of my knowledge the information on this application form is true and correct and that it is not misleading in any way.

Signed: _____ Date: ____/____/____



Byron Kinesiology Centre - 28 Seaview St, Byron Bay NSW 2481

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www.wellness.net.au -- www.kinesiologyschools.com.au

parijat@wellness.net.au