



Workplace Deaf and Auslan Awareness Training Booking Form

Vicdeaf

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East Melbourne 3002

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Fax: 9473 1122 **Website:** vicdeaf.com.au

Name:			
Organisation:			
Deaf person's name and EAF I.D. Number (compulsory):			
Contact Person on the day:			
Phone:			
Fax:			
Mobile (sms if available):			
Email:			
Postal Address:			
Starting Date & Times:			
Alternative Starting Date & Times:			
Training Venue Address:			
Number of trainees:			
Do the participants have any knowledge or experience with deafness? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Other Specific Considerations (please specify):			
Do you have a notebook and/or a data projector we can utilise for the training? <input type="checkbox"/> Yes <input type="checkbox"/> No			
FEES & CHARGES			
Training Fee as follows			
<input type="checkbox"/> : Workplaces with One Eligible Participant in the Workplace = \$1,440 [Inclusive of GST]			
<input type="checkbox"/> : Workplaces with More than One Eligible Participant in the Workplace = Refer Attached Quotation			
OFFICE USE ONLY			
Date of Contact:		Interpreter Booking Number:	
Interpreter/s:		Presenter:	