



# THE GRANGE COMMUNITY CENTRE (INC)

YOUR NEIGHBOURHOOD, YOUR CENTRE

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 Hoppers Crossing Vic 3029  
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 Fax: (03) 8742 8099  
 grangecc@alphalink.com.au

## Belly Dancing Workshops

PERSONAL DETAILS	
Surname	First Name
Title <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Other	
Address	
Suburb	Postcode
Telephone (H)	Telephone (W)
Mobile	Email
How did you hear about our program? <input type="checkbox"/> Friend <input type="checkbox"/> Newspaper ad <input type="checkbox"/> Flyer <input type="checkbox"/> Internal marketing <input type="checkbox"/> Other.....	
<input type="checkbox"/> Please tick if you do not want to receive offers, programs and event information from The Grange Community Centre	
PAYMENT DETAILS	
Please make cheques payable to The Grange Community Centre and write your name on the back.	
Total Cost \$	<input type="checkbox"/> Cash <input type="checkbox"/> Cheque <input type="checkbox"/> EFTPOS <input type="checkbox"/> VISA <input type="checkbox"/> Mastercard <input type="checkbox"/> Direct Deposit
Card number	Expiry Date
Name on card	Signature
<b>DIRECT DEPOSIT: BSB: 063 541 Account: 10057276</b> Please put Name & BD in description box	
DISCLAIMER	
I acknowledge that participation in the programme is undertaken at my own risk. I understand that no liability of personal injury, loss or damage to personal effects is accepted by The Grange Community Centre or its employees whilst attending this programme. I acknowledge that all cancellation must be requested in writing.	
Signature	Date

Please tick the dates below to indicate your attendance.

<input type="checkbox"/>	14 <sup>th</sup> November 2009
<input type="checkbox"/>	12 <sup>th</sup> December 2009
<input type="checkbox"/>	16 <sup>th</sup> January 2010