

Owner Builder Courses OFT approved NSW COURSE REGISTRATION FORM

Please carefully complete this form to enrol into one of these courses.

If you have any questions, call The Building Centre on 1300 884 876.

Please ensure your details are clear and correct, write in BLACK PEN and PRINT in CAPITALS, and then send to us.

Post	Fax	Scan & Email
The Building Centre Network Suite 209, 410 Elizabeth St Surry Hills NSW 2010 Australia	1300 884 256 or +61 2 8303 0533	courses@buildingcentre.com

Ready for use with a window faced envelope

Please tick which Owner Builder course you want to do?

BCN Form

<p><input type="checkbox"/> 1-Day Workshop on (day/month/year)</p> <p>_____ / _____ / _____ \$175.00</p> <p style="text-align: center;">(includes Lunch)</p>	<p><input type="checkbox"/> Correspondence Course</p> <p><input type="checkbox"/> Electronic Version (emailed as PDF) \$130.00</p>
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Prices include GST

Attendee Details

Use your name exactly as it appears on your Title Deed. This is how it will appear on your Statement of Attainment.

Title: _____ First name: _____ Middle name: _____ Last name: _____

Postal Address: _____ Suburb: _____ State: _____ Postcode: _____

Building Site Address: _____ Suburb: _____ State: _____ Postcode: _____
(if different to Postal Address)

Phone (H): (____) _____ Phone (W): (____) _____ Fax: (____) _____

Mobile: _____ Email[#]: _____

for confirmation

When are you planning to commence your Project? _____ When will you complete it? _____

Owner Builder Insurances

Please send me an OB Construction & Public Liability Insurance form.

Please send me an OB Personal Accident & Volunteer Workers Insurance form.

About our Project

We are planning to build:

New Home – Proposed roof _____

Extension – Existing roof _____

Extension roof _____

Renovation – Existing roof _____

Swimming Pool

Garage

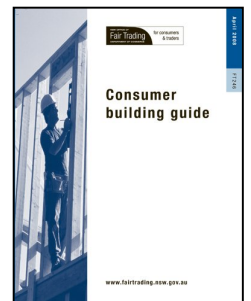
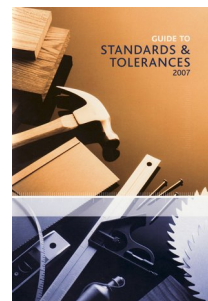
Other _____

FREE when you enrol in one of these courses

“Standards & Tolerances 2007”

&

“Consumer Builders Guide”



Payment Details – Please treat this as a Tax Invoice (ABN 57 174 102 507)

q Cheque / Money Order (enclosed). Please make payable to The Building Centre Network

q EFT[^] payment to The Building Centre Network, CBA BSB: 062-198 Account#: 1052 0936 made on ____/____/____
[^] Please include the Tax Invoice Number in your EFT payment + advise us by fax 02 8303 0533 or email: accounts@buildingcentre.com

q Credit card

Payment and Credit card Authority:

Please debit my / our: **q** Visa Card ID ____ (on back) **q** MasterCard ID ____ (on back) **q** Am Ex ID ____ (on front)

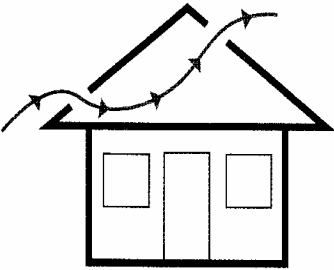




Card No: _____ Expiry date: ____/____

Name on Card: _____ Amount: \$ -

Signed on behalf of the company by: _____ Date: _____

Please print your name: _____ Position: _____

EVERY HOME SHOULD HAVE THESE:-

	<p>For your project, consider using the new 'smart and invisible' way to keep your roof space and home cooler in Summer, and reduce condensation in Winter.</p> <p style="text-align: center;">Installed Tile on Roof</p>	
 <p style="text-align: center;">Terracotta or Concrete 'ventilation' Roof tile</p>		 <p style="text-align: center;">Corrugated 'ventilation' Roof Unit</p>

They are installed in pairs, and we can supply Australia wide. Call us on 1300 884 876 or look it up on www.buildingcentre.com.au/smart-products.