INVOICE			INVOICE DATE: DUE DATE:	21/2/14
KODALY MUSIC ED PO BOX 603, FIVE [		TE of AUSTRALIA	ABN: 89431661 <sup>2</sup>	105
WORKSHOP: DATE: VENUE:	Friday 7th Ma Asquith Leag	2		7-10
TIME:	9:30 am - 4:3	-		
STAFF PERSON TO	CONTACT REGA	RDING THIS FORM		
SCHOOL / INSTITU	TION NAME			_
ADDRESS				_
SUBURB		POSTCODE	STATE:	
YOUR ORDER NUM	BER (if required)			
SELECT YOUR ENF	ROLMENT TYPE*:	ALL Workshop fees INCLUE	DE morning tea, lunch, afte	ernoon tea

- \$160 MEMBER\*\*

Please ensure ALL participants have REGISTERED ONLINE at www.kodaly.org.au

STAFF NAME	Amount payable	SUB-TOTAL
	GST	0.00
	TOTAL	

KMEIA NSW BR INC is not registered for GST

\*KMEIA NSW Inc. reserves the right to cancel the Workshop if the minimum number of participants is not achieved. No refunds will be given to individual registrations after 21/2/2014, except if the course is cancelled. \*\* Institutions/Schools that are members are allowed **2 staff members** at the member rate. **Additional staff** must be charged at the NON-MEMBER rate.

## PAYMENT OPTIONS: please email <u>nsw@kodaly.org.au</u> to notify us of payment

- Cheque make payable & post to KMEIA NSW Br Inc. PO Box 603, Five Dock, NSW 2046
- Direct Deposit/EFT St George Bank BSB 112 879 ACCT 153 921 273. Please type "CodeJC (YOUR SURNAME)" in description and email nsw@kodaly.org.au to advise of payment (eg., CodeJC Jones)

ALL ENQUIRIES: Treasurer - Rose Bloom (KMEIA NSW BR INC) M: 0431 213 056