



IC3 Enrolment form

Welcome to Techtorium New Zealand Institute of Information Technology Ltd.
Please read the instructions below carefully before you complete this enrolment form.

A Personal Details	
Family Name:	_____
Given Name(s):	_____
Preferred First Name:	_____
Gender: Male <input type="checkbox"/> Female <input type="checkbox"/>	Date of Birth: _____ / _____ / _____ Day / Month / Year
B Contact Details	
Home address:	_____
Suburb: _____ City: _____ Postcode: _____	
Phone: () _____ Mobile: _____ Email: _____	
C Course of Study	
Name of Course: IC3	Office Use:
Have you studied at Techtorium NZIIT before? Yes <input type="checkbox"/> No <input type="checkbox"/>	
D Organisations Information (if being funded by an organisation)	
Organisation:	_____
Postal Address:	_____
Purchase Order Number or Reference:	_____
Method of Payment: Cheque Cash Direct Credit (Please circle one)	
E Fees	
One year's access plus exams	\$355.00
Student Signature:	Date: _____
Authorising Organisation Signature:	Date: _____

Please mail, fax or email this form to one of the following locations.
Techtorium Computer Training PO Box 113 082 Newmarket, Level 3 182 Broadway Newmarket Ph 09 539 7523
Fax: 09 529 7524 or refresh@techtorium.co.nz