



# Computers in Education Group Of South Australia Inc.

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## WORKSHOP ENROLMENT FORM

Surname:..... First/preferred name:.....

School:.....

DECS       Independent       Catholic       Other

School Address:.....

Suburb/Town:.....Postcode:.....

Contact Telephone No:.....E-mail:.....

**Course Title:** Meet Your Moodle  
**Course Date:** Wednesday 16<sup>th</sup> July, 2008  
**Time:** 10am – 4pm  
**Where:** Thebarton Senior College, 40 Ashley Rd Torrensville SA

**\$66.00** CEGSA Member No.....

**\$88.00** Non Member

Payment by:      Cash      Cheque      Credit Card

Amount of payment \$.....Date:.....

If paying by CREDIT CARD, please complete the following

Bankcard      Name on Card .....

Mastercard      Card Number .....

     Expiry date      \_\_ / \_\_

Visa      Signature .....Amount \$.....

**Post to: CEGSA Inc., PO Box 147, MSC, Torrens Park, and SA 5062**