



TRAINING PROGRAM

SOUTH AUSTRALIA 2010

NAATI WORKSHOPS



TRAINING CALENDAR

NAATI workshops are aimed at giving candidates an insight into the theory & practice of interpreting & translating and the NAATI testing & marking procedures.

Mock Translation Tests

Marking of one sample translation passage: \$60.00
Marking of two sample translation passages: \$95.00

Information Sessions

Dates: Tuesday 3 August 2010 and
 Tuesday 7 September 2010
Time: 2.30pm – 3.30pm
Cost: No fee

LOCATION

Candidates will be notified of the venue for workshops after the enrolment for workshops has closed. Please post your enrolment form with the appropriate fee to NAATI at:

**PO Box 18
Rundle Mall SA 5000**

For further information on the NAATI workshops, please call the NAATI SA Office Manager on (08) 8410 5233.

NAATI WORKSHOP POLICY

1. Full payment is required before you undertake the workshop.
2. Cancellations must be in writing (mail, fax or email) to the NAATI State or Territory Office where you registered for the workshop.
3. If you cancel your registration more than 7 working days before the workshop your fees will be refunded.
4. If you cancel your registration 7 working days before the workshop your fees will be refunded less 15% of the fees paid.
5. If you cancel your registration 1-6 working days before the workshop your fees will be refunded less 25% of the fees paid.
6. When cancelling a session or sessions that were part of a discounted multiple booking, the refund will comprise of workshop session fee, less the discount and any other applicable cancellation fees.
7. If you cancel or do not attend on the day of the workshop, no fees will be refunded.
8. NAATI reserves the right to reschedule a workshop to a mutually convenient time if, for any reason, NAATI cannot hold the workshop on the date originally set.
9. All prices are inclusive of GST.

DECLARATION

This declaration must be signed and dated

- I have read and accept the terms and conditions of the NAATI Workshop policy.

Signature: _____

Date

D	D	/	M	M	/	Y	Y	Y	Y
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WORKSHOP ENROLMENT FORM

Please return this form with correct payment to **PO Box 18 Rundle Mall SA 5000** or fax to **08 8410 5235**

NAATI Number:	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>					
Title	Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Other <i>please Specify</i> <input type="checkbox"/>					
Given name						
Family name						
Postal address						
	Suburb			State		Postcode
Contact number (BH)	()		Contact number (AH)	()		
Email				DOB:	<input type="text"/>	<input type="text"/>
				<input type="text"/>	<input type="text"/>	<input type="text"/>

Select the workshops/sessions you wish to attend

- Marking of one translation passage - \$60.00**
 Marking of two translation passages - \$95.00
 Information Session - Tuesday 3 August 2010
 Information Session - Tuesday 7 September 2010

NAATI does not accept personal cheques (only AMO, BANK CHEQUES and OVERSEAS DRAFTS)			
Amount \$AUD:		All payments must be made in Australian dollars	
(Please tick <input checked="" type="checkbox"/> one)			
<input type="checkbox"/> Australian Money Order	<input type="checkbox"/> Bank Cheque (a cheque purchased from a bank)	<input type="checkbox"/> Overseas Bank Draft	
<input type="checkbox"/> Credit or Debit Card	<input type="checkbox"/> Cash (payable at any NAATI office)		
Card details (Please tick <input checked="" type="checkbox"/> one)			
<input type="checkbox"/> Visa	<input type="checkbox"/> MasterCard		
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Credit card number		Security number if requested	Expiry date
Card holder's name			
Card holder's signature		Date <input type="text"/>	
		<input type="text"/>	<input type="text"/>

OFFICE USE ONLY	DATE RECEIVED:	
	CC <input type="checkbox"/> CHQ <input type="checkbox"/> AMO <input type="checkbox"/> CSH <input type="checkbox"/> DD <input type="checkbox"/> EFTPOS <input type="checkbox"/>	AMOUNT PAID:
	ENTERED BY:	DATE:
	RECEIPT NUMBER:	TRANSACTION NUMBER: