

Payment Schedule for the 2010

VOCATIONAL GRADUATE DIPLOMA OF RELATIONSHIP COUNSELLING (CHC80208)

There are three methods of payment available to students. Select which method you wish to follow.

PAYMENTS METHODS

All applications must be submitted with an application fee of \$250.00 which is then deducted from the course cost (see below) or refunded in full if application is unsuccessful. Each applicant is responsible to ensure further payments meet the closure dates listed below.

METHOD 1 – One Annual Payment in full – 10% discount. Payment must be received in full by 2 weeks prior to commencement of course.

Course	Cost	Less 10% Discount (cannot be used in conjunction with any other offer)	Less Application fee	Amount Due
Vocational Graduate Diploma of Relationship Counselling (CHC80208)	\$8,767	\$876	\$250	\$7,641

METHOD 2 – Pay by the Semester – With the exception of Semester 1, payment must be received 4 weeks before the Semester commences. No discount applies.

Course	Cost	Less Application fee	Amount Due	Payment Due Per Term
Vocational Graduate Diploma of Relationship Counselling (CHC80208)	\$8,767	\$250	\$8,517	\$2129.25 x 4 Semesters

METHOD 3 – Pay by installments. Direct debits to be deducted from a personal account either fortnightly or monthly. A signed contract for direct debits must be organized prior to commencement of Term 1. No discount applies.

Course	Cost	Less Application fee	Amount Due	Payment Using Direct Debit
Vocational Graduate Diploma of Relationship Counselling (CHC80208)	\$8,767	\$250	\$8,517	\$170.34 x 50 f/n or \$370.30 x 23 mths

PAYMENT FORM

Sudent Name:

Name of Course:

Payment options:

(Tick one of the options below to secure your place in the above course)

- 1. One Annual Payment in Full
- 2. Pay by the Term
- 3. Pay by Installments *(completed Direct Debit Request must accompany the Payment Form)*

Please tick that you have read and agree to the Terms & Conditions outlined in the Application Form

Total Amount Payable: \$.....

1. A tax invoice to be issued *(please provide name and contact details)*

2. Send a cheque to: UnitingCare Institute of Family Practice
 PO Box 3156
 PARRAMATTA NSW 2124
 Ph: 02 8830 0755

3. Debit from: Mastercard Visa

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Name on Card:

Signature:

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