

evolution

to wellbeing

## reaistration form

Surname				G	iven Name					
Mailing Address								Postcode		
Phone (wk)	Phone (hm)				Mob					
D.O.B	Fax En				mail					
Choose your mem	bersl	nip	(all prices are GST inc	clusive)						
OPTION 0: 1 x 8 Week Track		ck	OPTION 1: 1 x 8 We	ek Tracl	k OPTION 2: 1 x 8 We	ek Tı	ack	Payment options		
Let's do it!			Let's get into i	Let's get really int			☐ Pay up-front in full			
Total sessions purchased	16		Total sessions purchased	24	Total sessions purchased	40		Pay monthly (direct debit or credit card only)		
Individual session cost	20		Individual session cost	15.80	Individual session cost	10.50		Payment amount		
Total cost	\$320		Total cost	\$380	Total cost	\$420		☐ Option  Total		
Illustrates your pot sessions in week three sions in week eight. T	ential e and his wo 1 and	at 3 so ould att	tendance pattern; essions in week four, 3 comprise a total of 1 end more than 24 ses	you m 3 sessic 6 sessic sions d	night attend 3 sessions in week five, 4 sessions during the 8 week puring the 8 week cycle to	ons i ons i period	n wee d.	g the 8 week cycle. The following exampeek one, 2 sessions in week two, ek six, 4 sessions in week seven and 1 seadditional session will be billed at \$20 p		
Payment method										
☐ Cash or ☐ Chequ	e (pay	/abl	e to "Evolution to We	ellbeing	$g'')$ or $\square$ direct debit					
☐ Bankcard ☐ Visa	□м	aste	erCard Name on card	d						
Card No					Ex	piry [	Date _	/		
Signature			Date							
so you may opt for the	е рау	mo	nthly (in advance) opt	ion. Ϋ́οι		ne be	ginni	or form or direct debit agreement. In doir ng of each new 8 week track at the appr new track.		
Terms & Condition	ıs:									
specific period of time	you a the fle	are e exib	entering into a commi e attendance pattern	tment v ) will he	with yourself. Knowing the lp to ensure that you r	nat yo	ou wil	nd agreeing to complete the sessions in I not be credited for missed sessions (whi Il commitment to training over the 8 wee		
					chase option 1 as oppos ire you attend all your s			ion 2 and increase your training frequen		
n the event that you track in writing. In suc	be av h a ca	vay ise <u>y</u>	for more than 4 week your registration optic	s durin on will b	g a track then it is impo be altered accordingly.	ortan	t that	t you advise us of this at the beginning		
to continue in the nex cycle that you will no	the to t cycle of be o	otal e foi con	balance program you billing purposes, you	must le so will	et us know in writing at l I result in automatic re-	east	14 DA	week cycle is automatic. If you do not wi AYS before the commencement of the ne on and an administration fee of \$50.00		
			I have rea	d and ι	understand the terms ar	nd ca	nditio	ons.		
	1		Signature					Date		