# SOUTH AUSTRALIAN INSTITUTE OF TRANSACTIONAL ANALYSIS

**PRESENTS:**

## Transactional Analysis 101

| | | | |
|---|---|---|---|
| **When:** | Friday | 21 August 2009 | - 6.00pm - 10.00pm and |
| | Saturday | 22 August 2009 | - 9.00am – 5.00pm |
| **Where:** | Glenelg Community Hospital – 5 Farrell Street, Glenelg South | | |
| **Cost:** | By Friday | 31 July 2009 – early bird | $350 |
| | After Friday | 31 July 2009 - full fee | $420 |

Workbook, morning and afternoon tea will be provided

Please return the lower half of this slip to:-
Redman Enterprises TA 101, 40B South Esplanade Glenelg South SA 5045
Ph: 08 8294 6559 Fax: 08 8376 1713 Email: enquiries@valerieredman.com
……..

I will be attending the above course in August 2009 and wish to enrol and make payment by the following method.

***TO PAY BY INTERNET BANKING***

**Direct Credit NAB BSB 085 005 Account Number 85 833 8125**
**Account Name: Redman Enterprises**

***(Please enter your name & booking ref # at bottom of this page on internet payment as a reference. It is your responsibility to ensure that we can identify your payment)***

***I wish to take advantage of the earlybird discount and pay only $350***

☐ Via internet banking on the ...../……/ 2009 showing your name and booking reference below
☐ By Cheque enclosed
☐ Please debit my credit card – details as below

***I do not wish to take up the earlybird offer and will pay my full fee of $420***

☐ Via internet banking on the ...../……/ 2009 showing your name and booking reference below
☐ By Cheque enclosed
☐ Please debit my credit card – details as below

CREDIT CARD Visa ☐ Mastercard ☐

Card Number: ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ Exp ☐☐

Cardholder's name:……...Signature:……

Your Name:……..……..

Address:……..……Postcode…..…....…....

Phone: (h)……...……..(w)……mob……..…Email:……..……

**Please note –As numbers are limited, early booking is advised**

**Please use Booking Reference 09 101 151**