



# Alice Springs Language Centre

Learning Languages | Connecting Cultures

Centralian Middle School Campus  
56 Milner Road, Alice Springs

PO Box 9045  
Alice Springs NT 0871

08 8955 2366  
www.alicespringslanguagecentre.com

## ADULT LANGUAGE CLASSES REGISTRATION FORM

A range of language courses are offered at the Alice Springs Language Centre. Courses are 8 weeks in length with sessions ranging from 1.5—2 hours long. All courses are held on the premises at Alice Springs Language Centre (Centralian Middle School Campus).

All courses are subject to minimum registrations and may be cancelled at short notice if insufficient numbers are received. Registrations close two days prior to the course start date. If we cancel your course you will be notified and offered your choice of credit for another course, or a full refund by bank transfer. Cash refunds will not be given. No refunds will be given to withdrawing students once the course has commenced.

### PERSONAL DETAILS

First Name: \_\_\_\_\_ Surname: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

Address: \_\_\_\_\_

### TERM 1 COURSES

|                          | Language           | Class Code | Dates                  | Time             | Cost   |
|--------------------------|--------------------|------------|------------------------|------------------|--------|
| <input type="checkbox"/> | Arrernte Beginners | ARR1       | 8 February to 29 March | 5:30pm - 7:00 pm | \$240* |

*\*Includes Central Eastern Arrernte Picture Dictionary*

**Important: As this course is held on school grounds, proof of vaccination will be required on arrival.**

### PAYMENT DETAILS

Full payment of fees are required prior to the commencement of the course. Organisations can be issued with an invoice upon provision of a purchase order.

**Cash/Eftpos:** Visit our office between 8am - 3pm

**Credit Card:** Please phone 8955 2366

**EFT:** Centralian Middle School      **BSB:** 065900      **Acc:** 10513523      Reference: Surname/Class Code

I would like to receive ASLC newsletters

Signature: \_\_\_\_\_

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

### OFFICE USE ONLY

| DATE | PAID | RECEIPT | PAYMENT TYPE | TERM | PROCESSED BY |
|------|------|---------|--------------|------|--------------|
|      |      |         |              |      |              |