ADULT & COMMUNITY EDUCATION (ACE) ENROLMENT FORM

Name of Learner: _____

Address: _____

Town/ City: _____

Post Code: _____ **Home Ph:** _____ **Work Ph:** _____ **Mobile:** _____

Email: _____

To assist us in developing a profile of our learners, please complete this section. Circle all that apply.
If you are enrolling in a government funded course **you must complete questions 1-4 in order to qualify for a subsidised or free place on your chosen course:**

1. **Are you a Permanent Resident of NZ:** **Yes** **No**
2. **Is English your native spoken language:** **Yes** **No**
3. **Do you have a school certificate in** **a) Maths** **b) English** **c) neither**
4. **Ethnicity:** **a) Maori** **b) Pacific Island** **c) Asian** **d) none of these**
5. How did you find out about this course? Newspaper Advert Website Other
6. Reason for enrolment.....
7. Gender: Male Female
8. Age: 16-24 25– 35 36– 45 46– 55 56-65 66– 75 76– 85 86+

Name of Course	Start date	Venue	Cost

	Total Fee $.....	Cash	Cheque	Eftpos	Credit-Card	Internet

Complete the following information for Credit Card payments ONLY

Cardholders Name…….

Cardholders Signature……...

Credit Card Number | | | | | | | | | | | | | | | | | | |

Expiry Date ____ / ____ Master Card ☐ Visa ☐