



WORLDWIDE TANK SERVICES
SPECIALIST INSPECTION LIFTING AND RELOCATION
OF BULK STORAGE TANKS
1, FORBES ROAD MANDURAH WESTERN AUSTRALIA
TEL. (61) 8 9535 8176 MOB 0439 913313

COURSE REGISTRATION

PAYMENT MUST BE RECEIVED PRIOR TO TAKING COURSE.

COURSE NAME: API 653 AUTHORISED TANK INSPECTOR

City Course Taking Place Auckland, New Zealand

Dates: 15th – 19th February 2016
Course Number: WTS/16/527

Student Information

First Name: _____ Last Name: _____

Home Address: _____

City/Town: _____ State: _____ Post Code: _____

Business Telephone: _____ Fax: _____ Mobile: _____

E-mail: _____ Birth Date: _____

Signature: _____

Employer Information

Company Name: _____

Operating Centre: _____

Mailing Address: _____

City/Town: _____ State: _____ Post Code: _____

Telephone: _____ Fax: _____

Mobile: _____ E-mail: _____

Please tick box below if you require invoice in your name rather than employer's name





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Method of Payment

Course: API 653 Authorised Tank Inspector : AUCKLAND NZ

15th – 19th February 2016

(AUD3,000)

EFT ANZ Banking Group BSP 016-745

Account No. 3488-54322

Sholl Street, MANDURAH WA 6210

Account Saxafork Pty Ltd T/as Worldwide Tank Services ABN: 15-623-962-089

.....
 Personal/Company Cheque attached Yes/No

.....
 Company Purchase Order Number:

Company Name:

ABN Number:

Address:

Invoice required Yes/No

Payment by Credit Card: Please charge my MASTERCARD VISA AMEX please circle relevant
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CREDIT CARD NO. _____

AMOUNT \$

EXPIRY DATE/..... SIGNATURE.....NAME ON CR. CARD_____
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Courses are offered subject to a minimum number of paid enrolments. Registration does not guarantee a place and payment or company P.O. must be received to confirm your place. Should WTS cancel a course, participants are entitled to a full refund or transfer of funds to a future course. In this event, students will be given their preferred option.

Please note that payment by credit card attracts a 1.5% charge in the case of Visa/Mastercard and 3% for Amex.

I have read the above and agree to the conditions therein.

Signature _____ Date _____