

“SAFE & INDEPENDENT DRIVING COURSE” COURSE ENROLMENT

COURSE NO: D2-_____ COURSE DATE: _____

SURNAME (Please Print)

GIVEN NAME

MOBILE # _____ LANDLINE # _____ DOB / /

ADDRESS: _____ POSTCODE: _____

EMAIL: _____

EMERGENCY CONTACT: _____ MOBILE: _____

I am currently licensed to drive: (Please indicate)

Manual:

Automatic:

LICENCE # _____ EXPIRY: _____

VEHICLE MAKE: _____ REG'N #: _____

INSURER: _____ Please circle: **COMPREHENSIVE** / **THIRD PARTY**

POLICY # _____ EXPIRY: _____

We like to keep in touch with our students:

Should you **NOT** wish us to contact you in future, please tick this box -

N.B. Information disclosed on this form is for METEC use only.

**ALL COURSES ARE CONDUCTED AT OUR FACILITY LOCATED AT
112 COLCHESTER ROAD, BAYSWATER NORTH.**

Please help us by telling us how you heard about METEC (please circle)

Facebook / Internet / Prior Contact / Print Media / RACV / Referral / School / TowEd / Other (please specify)

PAYMENT METHOD: **CASH** **CHEQUE** **CREDIT CARD** **VOUCHER**

FEE ENCLOSED: \$ If redeeming Gift Voucher:- Voucher #.:

CREDIT CARD DETAILS: MasterCard / Visa

Card Number: _____ Expiry Date: ____ / ____

Name on Card: _____

Signature: _____ Date: ____ / ____ / ____

Terms and Conditions of Use and Indemnity

1. I am eighteen (18) years of age or over.
2. I have a current Probationary Licence and undertake and agree that this Licence shall be current at the time of my participation in the course.
3. I undertake and agree to ensure that the motor vehicle used by me in this driving course shall be roadworthy and registered pursuant to current Victorian Road Traffic Legislation and that such vehicle is covered by Comprehensive or Third Party Property Only Insurance (details page 1)
4. I acknowledge and understand that:
 - (a) The driving course which I will participate in is potentially hazardous
 - (b) Other drivers will be using the course at the same time I am
 - (c) My presence on the course may expose me to risk either from an incident caused by me or by other people or by the nature of the activities conducted on the course
 - (d) I will not exceed the speed limits set by the Centre, unless under instruction to do so
 - (e) I will comply with all instructions given to me by all officers, employees, contractors, servants or other agents of the Centre
 - (f) I may be required to drive one of the Centre's or Instructor's motor vehicles and that I do so at my own risk and will use all due care and attention when driving the vehicle
5. I agree to indemnify and keep indemnified the Centre and its officers, employees, contractors, servants and other agents from all costs, actions, suits or demands arising out of any damage that may occur as a result of my negligence or as a result of any breach of the terms of this enrolment form:
 - (i) To any property owned by me/the participant whilst at the Centre's premises
 - (ii) Any property owned by the Centre including any motor vehicle provided for my use including personal property.
6. I authorize the Centre or its agents to obtain such medical or hospital treatment for me as the Centre may deem necessary whilst I am participating in the driving course or at the Centre and I agree to indemnify and keep indemnified the Centre and its officers, employees, contractors, servants and agents from all expenditure or costs in relation to such medical or hospital treatment together with any other costs or expenditure incurred by any ambulance, police or fire brigade attendance arising out of such treatment.

CANCELLATION/REBOOKING POLICY:

- Bookings may be transferred to another course provided a **minimum** of seven (7) business days' notice is given.
- **No refunds** will be given for cancellations or transfers made within seven (7) days of the course date.
- **All booking changes / transfers will incur a \$50 administration fee.**

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Signature: _____ **Date:** _____
(Participant)

Please forward completed, signed enrolment with your remittance to:-

**METEC DRIVER TRAINING,
P.O. Box 332, KILSYTH. 3137 or VIA EMAIL TO: training@metec.com.au**

A PAYMENT RECEIPT AND BOOKING CONFIRMATION WILL BE EMAILED TO YOU.

WE CAN BE CONTACTED ON 03 9725 4758 MONDAY TO FRIDAY 9.00AM TO 5.00PM