**APPLICATION FORM**

**Applicant Information**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Title: |  | First Name: | |  | | | Surname: |  | |
| Address: | | | | | | | | | |
| Town: | | |  | | | Post Code: | | |  |
| Home Phone: | | |  | | Mobile: | |  | | |
| Email Address: | | | | | | | | | |
| Special Dietary Requirements ❑ Yes ❑ No  If Yes, please give details: | | | | | | | | | |

**Emergency Contact Information**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Title: |  | First Name: | |  | | | Surname: |  | |
| Address: | | | | | | | | | |
| Town: | | |  | | | Post Code: | | |  |
| Home Phone: | | |  | | Mobile: | |  | | |
| Relationship to applicant: | | | | | | | | | |

**Programme Information**

It is expected participants will make their own way to the venue.

Are you willing to car pool from Adelaide or some other location along the way? ❑ Yes ❑ No

Are you willing to use your car for transportation of other participants during the stay?

Four-wheel drive vehicles, with high clearance, are the best to use, although Alpana to Blinman is a bitumen road.

* 4WD ❑ Yes ❑ No
* 2WD ❑ Yes ❑ No

Optional extras: (tick if you wish to participate)

* Blinman mine tour ❑ Yes ❑ No Sally’s tour ❑ Yes ❑ No

**Payment Information**

**Full payment is $650.00** which covers all accommodation and most meals, except Wednesday night at the North Blinman Hotel)

Please return form together with a **$50.00 deposit**

or payment **in full $650.00** to

Anglican Diocesan of Willochra

PO Box 96

Gladstone SA 5473

If paying deposit, please pay the remaining balance at least two weeks before the programme begins.

Pay by

❑ Cheque: Please make cheques payable to “Diocese of Willochra”

or

* Direct Debit

Name: Diocese of Willochra

BSB: 105-049

Account: 0324 395 40

Reference: ECO and Name

or

❑ Credit Card

❑ Visa ❑ Mastercard

*\*\* 3% surcharge is applied for credit card transactions*

|  |  |  |  |
| --- | --- | --- | --- |
| Credit Card Details | | | |
| Card Number: |  | | |
| Expiry Date: |  | CVC: 3 digits on back of card |  |
| Cardholder Name: |  | | |