



# REST Professional End of Financial Year Training Order Form New Zealand Online

## Client Details

Company Name: \_\_\_\_\_

Rockend Client ID: \_\_\_\_\_

Contact Name: \_\_\_\_\_

## Training

Number of Hours: \_\_\_\_\_ at \$190.00 per hour

Preferred Time & Date: \_\_\_\_\_

Number of Attendees: \_\_\_\_\_

The requested consulting will be organised once the order form is received with payment. Bookings are based on trainer availability.

## Payment Details

Place a tick in the box according to your chosen method of payment.

Direct deposit into Rockend bank account

Please use your Client ID as the reference and send copy of the deposit slip to Rockend at fax 02 9966 0911 or email [training@rockend.com.au](mailto:training@rockend.com.au)

Bank: BNZ

B.S.B: 02 - 0214

Account Name: Rockend Technology Pty Ltd

Account Number: 0151306 - 00

Please charge to:

Mastercard

Visa

Number:

Exp:

CVV:

Name on Card: \_\_\_\_\_

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

Amount: NZ \$ \_\_\_\_\_

Contact Person: \_\_\_\_\_

**Please complete, scan and email to [training@rockend.com.au](mailto:training@rockend.com.au)**

The requested consulting will be organised when the order form is received with payment. Bookings are based on trainer availability, session dates and times and training topics will be confirmed by your consultant. Purchased consulting is valid for 6 months.

Please read our Cancellation Policy at [www.rockend.com.au/cancellationpolicy](http://www.rockend.com.au/cancellationpolicy)

I \_\_\_\_\_ agree to the above terms and conditions.