

Training Partner Application



Please fill in form and email to partnerships@livcor.com.au

Name:

Organisation:

Street Address:

Postal Address:

Email:

Phone: Mobile:

Please provide a brief overview of your current business operations to date:

I hereby declare that the detail provided in this application are true and correct and wish for my application to progress, once payment of the application fee has been received.

Signature: Date:

APPLICATION FEE (non-refundable)

\$249.00 inc. GST

Payment Details:

- Payment by EFT to BSB: 083 321 Account Number: 121216342 (Reference: TP Application – 'Your Business Name')
- Cheque enclosed with payment to APL Group Pty Ltd. (Invoice will be forwarded) Post cheques to:
20 Viewtech Place Rowville VIC 3178
- Payment by Credit Card as detailed below;

Credit Card Type: Visa Mastercard

Card Number:

Expiry Date: / 3 Digit Security Code:

Name on card: Signature:

Authorised person: Date:

LivCor reserves the right to refuse an application progressing at any stage during the application process where LivCor representatives find that an applicant is unsuitable for partnership. If this occurs any application fee paid is not refundable.