



ORDER FORM AND LICENCE UNDERTAKING (@ OCT 2008)

Please complete the order form and licence undertaking as required, attach cheque payable to NSW Community Services and Health ITAB and send to:

NSW Community Services and Health ITAB
PO Box 562, Gladesville, NSW, 1675
ABN: 95 530 979 012

Table with 4 columns: Item, Price (incl.GST), QTY, Subtotal. Rows include Certificate IV in Alcohol & Other Drugs Work CHC41702, Children's Services, and a TOTAL ENCLOSED row.

ITAB Licensing Arrangements

(Please fill in name of your company)

undertakes to meet the following conditions for use of the training materials ordered.

- 1. The purchaser undertakes not to reproduce by any means copies that exceed the number of licences purchased on materials that are in electronic format (CD).
2. Where hard copies are purchased, these may not be reproduced by any means and require one purchased copy per participant.

Signed Name (please print) Position Date
Organisation
Delivery Address
Suburb/Town State Post code
Telephone Facsimile
Email Address
Date of Course Commencement