**Permaculture Design Certificate 2022**

**April 21-25, May 6-8 & 21-22**

***Registration form for direct deposit payments***

10-day course at The Food Forest, Gawler, South Australia with David Holmgren, the Brookmans & others

If you are paying **online,** pleasedo **not** use this form. Go to foodforest.com.au/courses/ and make your payment online.

Please check your payment method below and fill in the required details.

Paying by **direct deposit/bank transfer:** Pleasecontact us ([foodforest@bigpond.com](mailto:foodforest@bigpond.com)) for our banking details.   
*Please give the transfer a clear ID with your name and provide details of the transfer below.*

Payment date: ........................ ID (Name/Number): ...................................... Amount: $ .....................

Once you have made your direct deposit and filled in the details below, please email this form to [foodforest@bigpond.com](mailto:foodforest@bigpond.com)

**Payments**

* Your place is reserved upon receipt of full registration or $500 deposit. Final payment is due on Friday April 1st to qualify for the early- bird price. Balance payments after April 1st attract the standard price. See table below.
* **Partner/ Group prices** apply when bookings for 2 or more people are made **at the same time & in one payment**.  
  Payment for the entire group is to be made in **one transaction**, i.e. 2 people would be paid for in **one** online,   
  direct deposit.
* **Registration includes:** morning and afternoon tea, lunch, plus dinner on Sat May 21st, course notes and entry fees on field trips
* Please note: In recent years the course has filled well before the close of early bird discount date.  
  We suggest you book early to avoid disappointment.
* **Cancellation:** We understand that circumstances can change. If a cancellation is made before Friday April 1st a refund will be made, minus an admin fee of $150.00. If you cancel after Friday April 1st, the registration is transferable to another person or another PDC course to be run at The Food Forest, but is non-refundable. ***If*** however, we can successfully offer your spot to someone on our PDC waiting list we will refund your fee minus an admin fee of $150.00
* In the event of insufficient registrations or other unforeseen reasons, the organisers reserve the right to cancel the course with one week’s notice. In this case a full refund will be made**.** Unfortunately we can-not refund travel expenses incurred.
* If The Food Forest has to cancel the PDC due to COVID government regulations prior to commencement, a refund of fees paid will be made, less an admin fee of $75
* If you are forced to withdraw your participation in the PDC before the course begins due to COVID regulations, a refund of fees paid will be made, less an admin fee of $75
* **If the course structure must be changed while it is in progress due to COVID, every effort will be made to reschedule it. If you are unable to participate due to re-scheduling, a proportional refund of fees** paid will be made, less an admin fee of $75.
* **If the course must be cancelled while it is in progress due to COVID regulations, a proportional refund of fees** paid will be made, less an admin fee of $75.
* In all of the above cancellation scenarios, we can-not refund travel expenses incurred**.**
* Please download, fill out and *return the* *separate registration form* (requesting emergency contact details, any dietary requirement you may have etc)
* Please contact us for our bank details if you would like to electronically transfer your payment.

**Registrant’s details** (for a partner/ group booking, space is provided on the next page for other participant/s details)

Name (Person 1): ..........................................................................................

Address: .................................................................................................PC ................

Phone: ………. ..........................................................

Email: ...................................................................

Emergency contact name: ......................................................................................

Relationship to you: ........................................... Phone: .....................................

Special dietary requirements (eg vegetarian, gluten or dairy intolerance, etc):...............................................................................

We do our best to accommodate all dietary requirements, however *very* specific & particular needs you may need to supply.

*See next page for registration options…..*

|  |  |  |  |
| --- | --- | --- | --- |
| **‘Deposit-only’ payments** (by direct deposit) | | | |
| 1) Enter the number of people you are registering for in the space provided to the right of the price. 2) Calculate the total of your deposit.. Final payment by Friday April 1st 2022 to qualify for early-bird discount. After April 1st the standard price applies.  **Partner/Group bookings:** Please also fill out *‘Other registrants’ details’* for the other members of your group.  Payment for entire group is to be made in **one transaction**, ie 2 people would be paid for in one direct deposit of $1000.  Final payment will also need to be made in one transaction. | | | |
|  | **Earlybird/s** (before COB April 1st 2022 | **Standard price** (from April 1st 2022) |  |
|  | $500 deposit pp x ........ = **$ ...........** | $500 deposit pp x ........ = **$ ...........** |  |

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Full registration payments** (by direct deposit) | | | | | | | | | | |
| **Single person payments:** | | | | | | | | | | |
| Enter a ‘1’ to the left of the option you are registering for. | | | | | | | | | | |
|  | | **Earlybirds** before COB April 1st 2022 | | | | **Standard price** from April 1st 2022 | | | | |
| Full Registration | | ........ | $1960pp | | | ........ | $2145 pp | | |
|  | | | | | | | | | |
| **Partner/Group payments (2 or more people):** | | | | | | | | | |
| 1) Enter the number of people you are registering for in the space/s provided to the right of your chosen option/s.  2) Calculate the total of your group booking.  Please also fill out details for the other members of your group at the bottom of this page.  Payment for entire group is to be made in **one transaction**, ie 2 people would be paid for in **one** direct deposit. | | | | | | | | | |
|  | **Earlybirds** before COB April 1st 2022 | | | |  | **Standard price** from April 1st 2022 | | |  |
| Full registration, **partner/group booking** | $1910 pp x ........ = **$ ...........** | | | |  | $2095 pp x ........ = **$ ...........** | | |  |
|  | **Total** | | | **= $ ...........** | **Total** | | | **= $ ...........** |  |

**Other registrants’ details**

Name (Person 2): ....................................................................................................

Address: .................................................................................................................

Phone ………. ..........................................................

Email: ...................................................................

Emergency contact name: ......................................................................................

Relationship to registrant: .............................. Phone: .....................................

Special dietary requirements (eg vegetarian, gluten or dairy intolerance, etc):................................................................................

We do our best to accommodate all dietary requirements, however *very* specific & particular needs you may need to supply.

Name (Person 3): ....................................................................................................

Address: .................................................................................................................

Phone: ……… ..........................................................

Email: ...................................................................

Emergency contact name: ......................................................................................

Relationship to registrant: .............................. Phone: .....................................

Special dietary requirements (eg vegetarian, gluten or dairy intolerance, etc):..............................................................................

We do our best to accommodate all dietary requirements, however *very* specific & particular needs you may need to supply.

*Please add additional names and details if required*