

## Refund request

FULL NAME:
DATE:
ADDRESS:
PHONE NUMBER/S:
EMAIL:

COURSE NAME:
COURSE CODE:
COURSE START DATE:
PAYMENT METHOD AND DATE PAID:

REASON FOR REFUND:  
Please attach additional pages/ evidence if applicable.

REFUND METHOD: CHEQUE  BANK ACCOUNT

Please provide your account or credit card details. Please note that the credit card must be the same as the one that you made the original payment on.

OFFICE USE ONLY:

Authorised by: \_\_\_\_\_

Processed by: \_\_\_\_\_

If a refund is due under Adept Training's *Refunds and cancellations policy*, please allow up to 14 days to receive a refund.

	AMOUNT PAID	
MINUS ADEPT TRAINING ADMINISTRATION FEE		-\$200.00
	REFUND REQUESTED	