

## AUTHORITY TO INVOICE FOR STUDENT FEES


**RETURN TO:**

Kangan Institute, Private Bag 299,  
Somerton VIC 3062

**EMAIL:**

enquiries@kangan.edu.au

### DETAILS OF EMPLOYER / SPONSOR AGREEING TO PAY THE STUDENT FEES

Trading name

Address

Postcode

ABN

Phone

Email Address

Postal Address (if different from above)

Postcode

Contact person

### ENROLMENT AND FEE DETAILS

Student name

Course

Tuition Fees\*

\$

General Service Fee\*

\$

Material Fees

\$

Consumables Fee

\$

Skills Recognition / RPL Application Fees

\$

**TOTAL FEES**

\$

\*Where concessions on fees are being claimed for employees, the student should present the relevant Health Care Cards, Pensioner Concession Cards and Veteran Gold Cards at time of enrolment. (Otherwise please attach copies).

Please note that concession rates do not apply to enrolments in diplomas, advanced diplomas, fee for service activities (such as short courses) or where the fees are being paid for by a Commonwealth Government Department or Agency or as part of a Commonwealth program or initiative.

**We / I agree to pay the invoice within 30 days of date of the issue of invoice.**

**We / I hereby agree to that in the event of our/my failure to pay Kangan Institute pursuant to the terms of this agreement we / I shall pay Kangan Institute upon demand all collection costs, commissions, fees, charges and expenses, including legal costs, which Kangan Institute may elect to pay in its absolute discretion to make good any failure by we / I to comply with the terms of this agreement and/or to protect the rights of Kangan Institute generally under this agreement.**

Name

Position/Title

Signature

Date

*Office use only*

Student ID: \_\_\_\_\_ Company ID: \_\_\_\_\_

Enrolment Officer's Name: \_\_\_\_\_ Date: \_\_\_\_\_