



TASTE & SEE APPLICATION

Personal Details Mr Mrs Miss Ms Other

Name: _____

Address: _____

Postcode: _____ Telephone: _____

Email: _____

Age 18-26 27-35 36-45 46+

Dates of Taste & See Week: _____

Next of Kin: _____

Telephone: _____

Please debit my Bankcard Mastercard Visa Card

Name on card: _____

Signature: _____

Card Number: _____

Expiry Date /

Please note that all credit card payments incur a bank fee of 2.8%

or

Cheque/ Money Order enclosed (please make payable to Capernwray Torchbearers Australia Pty Ltd)

CAPERNWRAY TORCHBEARERS AUSTRALIA RESERVES THE RIGHT TO ALTER

SUBJECTS AND/OR LECTURERS WITHOUT NOTIFICATION

PAYMENT TOTAL: \$ _____

*Full amount to be sent with this application



RED LINE WILL NOT PRINT IT INDICATES THE FINAL TRIM SIZE



TASTE & SEE

one week- live in- hands on Bible School

\$120

includes accommodation, meals & studies