**Secondary School’s Cooking Competition**

Australian Culinary Federation

PO Box 115 Kew East VIC 3102

ABN 25 295 509 980

0439 408 106

**Registration Form/Tax invoice/Receipt 001**

Upon payment, this form becomes your TAX INVOICE & RECEIPT please print a copy for this purpose.

Entry Fees: $55.00 per team including GST

Payment

Australian Culinary Federation

BSB 083004

ACC 93-740-7360

Please ONLY type information

Please email to your Competition Convenor with Team Details Forms AND photo ID for entrants & teachers

Number of teams: Total amount: $ Date:

|  |  |
| --- | --- |
| **School** |  |
| Name |  |
| Address |  |
| Phone |  |
| Email |  |
| **Teacher** |  |
| Name |  |
| Email |  |
| Mobile |  |
| Address |  |
| Emergency Contact | |
| Name |  |
| Phone Number |  |
| Relationship |  |
| Medical Conditions, Allergies, Medications (Please include Medi alerts) | |
|  |  |
| Dietary Requirements (Please list) | |
|  |  |

I permit my name and any photographs of myself to be released to the media for promotional purposes for regional SSCC & National SSCC should the team be successful

Signed Date

Credit Card Payments

DATE

NAME

ADDRESS

CITY STATE POSTCODE

 

CARD NUMBER

EXPIRY DATE MONTH YEAR 20 CCV

EMAIL MOBILE PH

SIGNATURE TOTAL AMOUNT $