



iDECIDE SEMINAR BOOKING FORM 2024

Thank you for expressing interest in holding the **iDECIDE SCHOOLS TOUR** in your school with **REGGIE DABBS**. Please fill out the form below with your details and seminar preferences. It will assist us in working together to provide an excellent seminar at your school. Once completed could you please email a copy of this booking form to: info@iseecare.com.au

For more information regarding iSEE CARE, please visit our website
www.iseecare.com.au

SCHOOL DETAILS

NAME OF SCHOOL:

TOWN/CITY:

Contact Person:

Contact Details:

Mobile:

Telephone:

Email:

Address:

THE iDECIDE SEMINAR DETAILS

Please tick which presenter you would like to speak to in your school.

REGGIE DABBS

Please indicate with 1, 2 & 3 with your preferred day for the iDECIDE seminar?

- Tuesday 03 September
 Wednesday 04 September
 Thursday 05 September
 Friday 06 September

What is your preferred time for the iDECIDE seminar? *(please specify your 2 best times)*

- Morning 8 – 8:45am
 Morning 9 – 9:45am
 Mid Morning 10 – 10:45am
 Mid Morning 11 – 11:45am
 Midday 12 – 12:45pm
 Mid Afternoon 1 – 1:45pm
 Mid Afternoon 2 – 2:45pm
 Afternoon 3 – 3:45pm

Please indicate the preferred length of your iDECIDE seminar? _____

(Seminars are usually 45mins, if you have a different preferred length, please specify)

What will the target audience for your iDECIDE seminar be? *(please tick):*

- Specific year level(s)
 Numbers of students attending *(please specify)* _____

Which school venue will be made available for the seminar & is there access to power?

(please specify) _____

BILLING DETAILS

Who do we make the invoice out to?

Email address for invoice:

Contact details for financial administrator of the individual/school/organization funding the iDECIDE seminar:

Name:

Mobile:

Telephone:

Address:

Email:

AGREEMENT

I agree on the price of **\$770 inc GST** for a school seminar conducted by **iSEE CARE** on the date of _____, and agree that this account will be settled within 30 days. I agree to the terms of this letter and to the best of my knowledge all of the above details are correct.

Name:

Signature:

Date:

If you have any queries or questions, please do not hesitate to contact us on 1300775503 or email info@iseecare.com.au

We are looking forward to visiting your school.

Kind Regards,

The iSEE CARE Team