



Expression of Interest

I wish to register my school's interest in attending the VPA China Student Exchange Program, Thursday 18th October – Thursday 1st November 2018.

Name of School:	
Name of Principal:	
Contact Phone:	
Contact Email:	
Year of participation in previous VPA China Study Tour (if applicable):	
Name of Accompanying Teacher (future correspondence will be sent to this person):	
Contact Email:	
Total Amount of First Payment:	
Signed:	

I confirm if selected, I will make a first payment of **\$1,500 per student** and provide all necessary documents i.e. personal details forms, medical forms and passports by Monday 30th April 2018.

EFT Payment to Commonwealth Bank
 Creditor Name: VPA
 BSB: 063 238
 Account No: 10021838

**SEND COMPLETED FORM BY
 WEDNESDAY 28TH MARCH:**

Elissah Hill at ehill@vpa.org.au

Tax Invoice - ABN 53 483 039 713

All EFT payments to be accompanied by remittance advice emailed to kcant@vpa.org.au



Registration Form

School Name: _____

	First Name	Last Name	Age (as of 02/11/18)	Passport Number	Nationality
Teacher 1					
Teacher 2					
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					

**SEND COMPLETED FORM BY
WEDNESDAY 28TH MARCH:**

Elissah Hill at ehill@vpa.org.au