



ENROLMENT FORM

Use BLOCK letters when completing this form and please retain a copy for your records.

1. PERSONAL INFORMATION AND CONTACT DETAILS:

Candidate ID (if known):	<input type="checkbox"/> Male	<input type="checkbox"/> Female	
Practitioner Member:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Post Nominal (<i>for existing members only</i>):	<input type="checkbox"/> MeSAFAA	<input type="checkbox"/> MSAFAA	<input type="checkbox"/> AfSAFAA
Title (<i>Mr, Mrs, Ms, Miss, Other</i>):	First Name:		
Middle Name:	Surname:		
Date of Birth (<i>optional</i>):			
Home Address:			
	State:	Postcode:	
Home Telephone Number:	Mobile Number:		

EMPLOYMENT DETAILS:

Position Title:		
Organisation Name:		
Organisation Street Address:		
	State:	Postcode:
Preferred Postal Address:		
	State:	Postcode:
Organisational Direct Number:		
Email Address:		

Note: Any materials including Certificates etc will be sent to the above email address

3. COMPULSORY APPOINTMENT OF AN INDEPENDENT SUPERVISOR

All online examinations require a supervisor to be appointed prior to sitting for their online exam/s. Please refer to the Supervisor Guidelines on our website.

4. PAYMENT DETAILS

All fees must be paid at the time of enrolment.

Credit Card:	<input type="checkbox"/> Amex	<input type="checkbox"/> Visa	<input type="checkbox"/> Mastercard
Amount Payable: \$			
Name of Cardholder:			
Credit Card Number:			
Expiry Date:			
CVV Number:			
Signature:			

ALL ENQUIRIES & ENROLMENT FORMS SHOULD BE DIRECTED IN THE FIRST INSTANCE TO:

Stockbrokers and Financial Advisers Association (ACN 089 767 706)
Level 5, 56 Pitt Street, Sydney NSW 2000
Telephone: (02) 8080 3200
Fax: (02) 8080 3299
Email: accreditation@stockbrokers.org.au
Website: www.stockbrokers.org.au

SAFAA CANCELLATION

Please ensure that the course you intend to enrol in is one you are required to undertake and are committed to completing, as fees are non-refundable. Substitutes are welcome within the enrolment period.