

Janssen Spirituality Centre
for Inter-religious and Cross-cultural Relations
22 Woodvale Road Boronia VIC 3155 Tel. 03 9762 6625 Fax 03 9762 6630
Email: enquiries@janssencentre.org Web: www.janssencentre.org

Registration Form for people who have not completed the long form previously

- Please PRINT:** 1. Title: (Mr, Mrs, Ms, Rev, Sr, Br, Ven.) _____
First Name: _____ Intl: _____ Family Name: _____
2. Address: _____
City: _____ State: _____ Postcode: _____
3. Telephone: BH: _____ AH Tel: _____
Mobile: _____
4. Email: _____
5. Religious Affiliation / Denomination (to help us plan for, and inform you about, our spirituality programs):
To what faith tradition do you belong/ _____
6. Cultural Background (to help us plan for, and inform you about, our cross-cultural events):
To what cultural background do you belong? _____
7. I would like to register for the following event. (While all donations are voluntary, we do recommend an amount which contributes towards the cost of conducting the event and running the Centre.)
Name of event: _____ Date: ___/___/___
8. I am the holder of a Concession Card (e.g. senior, pension or student card) : YES, No
9. If this is an overnight programme, I intend to Live-In (towels and linen are included.) Live-out
- 10. Dietary Requirements** (to assist us in planning meals): **please tick (✓)**
 Not applicable Vegetarian Vegan Kosher Hallal
 Low Salt Gluten Free Low Cholesterol Other: _____
- 11. Do you have a disability or medical impairment** (to assist us in planning for your safety and comfort)?
please tick (✓) Not applicable, Difficulty hearing, Mobility Impairment (not able to use stairs),
 Visual Impairment Other: Please specify: _____
- Contact name and number in the event of an emergency: Relative or Friend
Name: _____ Tel No: _____

I certify that the above information is correct and I consent to receiving electronically further information relating to this or similar event(s) in the future, e.g. receipt(s) for voluntary contributions, copies of advertisements of events.

Privacy Statement: I note that the Janssen Spirituality Centre (JSC) is committed to ensuring the privacy of all information it collects. Personal information collected by the JSC will only be used for administrative purposes and the planning of programmes, including but not limited to statistical information and to assist us in the marketing and planning of programs. Personnel information collected by the JSC will only be disclosed to third parties with the written consent of the person concerned, unless otherwise required by law.

Signature: _____ **Date:** _____

For JSC Office use only: Date application received: ___/___/___

Date applicant informed that place is available / place is not available: ___/___/___ Initials: _____

\$____ Donation received on ___/___/___ Receipt for donation issued on ___/___/___ by _____ .

Date application entered into ACCESS database: ___/___/___ Initials: _____