FLORAL ART SOCIETY OF NEW ZEALAND BAY OF PLENTY AREA

2024 TEACHER'S UNIT REGISTRATION FORM

| Name: |
|---|
| Address: |
| Phone: Email: |
| Signed: |
| Please enrol me in the above 'Teacher's Unit. I have forwarded my \$30 (non refundable) Registration Fee to the bank account shown below. |
| Any enquiries should be referred to the Convenor: Francine Thomas. francines.afloralaffair@gmail.com |
| All lectures will be held at the Edgecumbe War Memorial Hall, on 23,24 |
| March and 14, 15 April. Test Dates 10,11 August (at the same venue). |
| Bank Account details: FASNZ BOP Education |

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