

Certificate Re-Print Request Form

To request a re-issue of your certificate please complete the details below and ensure you provide as much information as possible, including the appropriate reason for your re-print has been selected.

Student Details

Given Names:			
Surname:			
Address:			
Date of Birth:		Phone Number:	
Email			
All certificate re-print requests require appropriate identification to be attached to this request			
Identification Type: (please attach a copy to this form)	<input type="checkbox"/> Driver's Licence	<input type="checkbox"/> Passport	<input type="checkbox"/> Birth Certificate
	<input type="checkbox"/> Medicare Card	<input type="checkbox"/> Proof of Age Card	<input type="checkbox"/> School ID card

Certificate Details

Qualification:			
Certificate No:		Instructor Name:	
Reason: (Select one option)	<input type="checkbox"/> Certificate lost or stolen	<input type="checkbox"/> Change legal name on certificate	<input type="checkbox"/> Spelling error on original certificate (no charge)
Pre-print Type:	<input type="checkbox"/> Email copy (\$12.50)	<input type="checkbox"/> Hard Copy (\$25.00)	

Payment Details

<input type="checkbox"/> Credit Card Payments					
Type of Card:	<input type="checkbox"/> Visa Card		<input type="checkbox"/> MasterCard		
Name on Card:					
Card Number:			Expiry Date:		
Signature:			Date:		
<input type="checkbox"/> EFT Payments (Bendigo Bank)					
Account Name:	Sport SA	BSB Number:	633-000	Account Number:	149152985
Reference:	If you are paying by EFT, please use reference: CertRP-LastName				

Sport SA Administration (office use only)

Office Use Only		Date:	Initials:
	Certificate has been re-printed and copy saved in the students electronic file		
	Certificate has been posted to the student		