



PROGRAM  
REGISTRATION FORM

Please return completed form to  
qcwt@usq.edu.au

Title:  Mr  Mrs  Ms  Other

First Name \_\_\_\_\_

Last Name \_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ (Required as evidence that you are legally old enough to taste wines)

Course name & date \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Mobile \_\_\_\_\_

Email \_\_\_\_\_

Special Needs/Allergies \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Payment Details**

For Individuals - Payment required with order Cheque/Credit Card  
Cheque/Money Order Please make cheques payable to  
'Queensland College of Wine Tourism' (USQ - A.B.N. 40 234 732 081)

Credit card – Please complete the payment form below.  
Card type (please tick)  VISA  MASTERCARD  BANKCARD

Name on Card \_\_\_\_\_

Card No \_\_\_\_\_

Expiry Date: Month \_\_\_\_\_ Year \_\_\_\_\_ Amount: \$ \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please note for WSET program, the international registration forms must be completed.



gateway schools to  
**food, wine and  
tourism industry**



**Phone 07 4685 5050**  
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