



96.5FM
My Community Radio Station

CENTRAL HUNTER COMMUNITY BROADCASTERS Inc

ABN: 6 037 155 0162

P.O. Box 421
CESSNOCK NSW 2325
Web Site: www.2chr.org

Phone (02) 4991 1286
Fax (02) 4991 1757
Email secretary@2chr.org

PRESENTER TRAINING COURSE APPLICATION

I WISH TO APPLY TO PARTICIPATE IN THE PRESENTER TRAINING COURSE

NAME _____ Member No: _____

ADDRESS: _____ P/CODE _____

CONTACT PHONE :(h) _____ (w) _____

Mobile: _____ Email: _____

AGE GROUP: UNDER 16 16-25 26- 35 36-55 OVER 55

Are you a member of Central Hunter Community Broadcasters Inc: Yes No

The cost of the course is \$ _____

I have the following experience in radio broadcasting:

The reason I would like to participate in this course is:

I heard about the course through:

A friend On Air Announcement Other _____

Signed _____ Date ___/___/___

Please forward completed application form and payment to:

The Secretary
Central Hunter Community Broadcasters
P.O. Box 421
CESSNOCK NSW 2325

Office use only

Payment Receipt No _____ Membership Checked _____

Referred to Training Co-ordinator ___/___/___ Training Completed ___/___/___

Referred to Programme Co-Ordinator ___/___/___