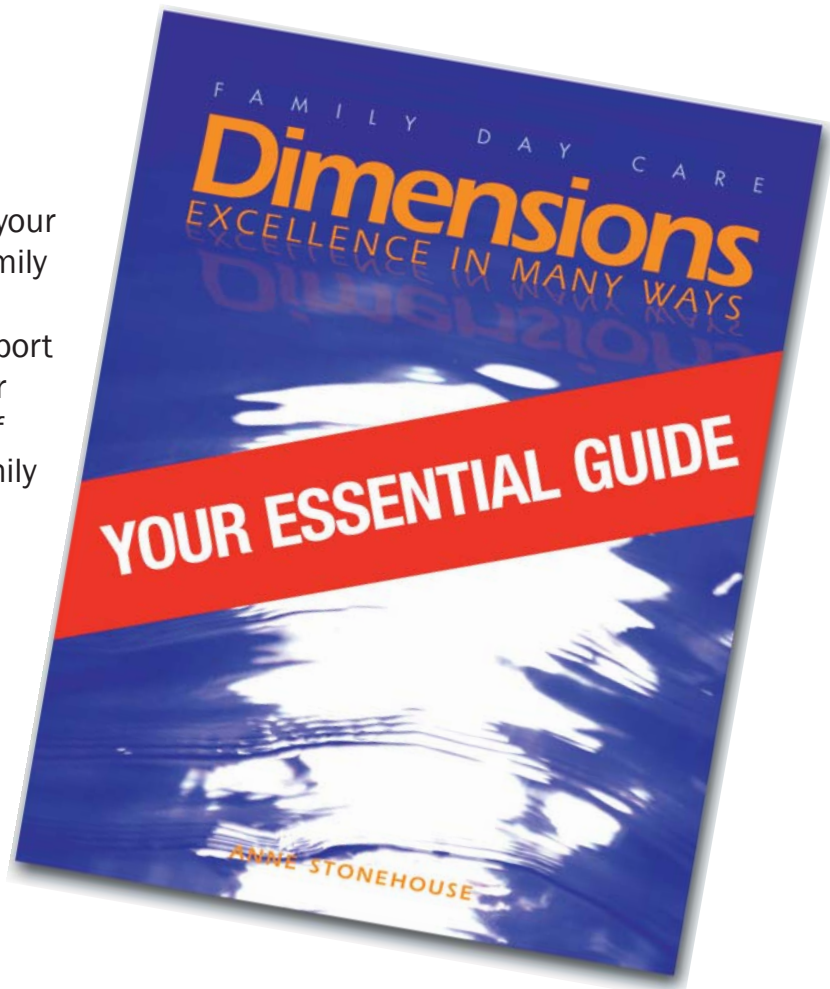


ORDER FORM

Dimensions – Excellence in Many Ways is your essential guide to operating a successful family day care service. Focusing on your childcare practice, the vital relationships that you support and your own attitudes and views about your work, *Dimensions* will take you through all of these important aspects of working as a family day care carer – running your own business from home.

It's a book about carers with lots of stories and ideas from real carers – stories you can relate to, that will help you make sense of the ins and outs of providing a top quality childcare service in your own home.

Don't think about it twice – you can't do without this book.



NAME OF FAMILY DAY CARE SCHEME OR IN-HOME CARE SERVICE YOU ARE REGISTERED WITH:		OFFICE USE ONLY	
<input style="width: 95%;" type="text"/>		C A O <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/>	
TITLE	FIRST NAME	LAST NAME	
<input style="width: 80%;" type="text"/>	<input style="width: 80%;" type="text"/>	<input style="width: 95%;" type="text"/>	
ADDRESS			
<input style="width: 98%;" type="text"/>			
SUBURB		STATE	POSTCODE
<input style="width: 95%;" type="text"/>		<input style="width: 80%;" type="text"/>	<input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/>
DATE OF BIRTH		DAYTIME TELEPHONE NUMBER	
<input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/>		<input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/>	
YOUR EMAIL ADDRESS			
<input style="width: 98%;" type="text"/>			
I would like to order:			
<input style="width: 80%;" type="text"/> copies @ \$16.50 each (Members)		<input style="width: 80%;" type="text"/> copies @ \$21.50 each (Non-members)	
To pay by cheque or money order complete the following details:			
<input type="checkbox"/> Enclosed is a cheque/money order made payable to FDCA. Post the completed application form together with your payment to FDCA Member Services, PO Box 571 Gosford NSW 2250. OR			
Please charge my <input type="checkbox"/> Mastercard <input type="checkbox"/> Visa			
NAME OF OF CARDHOLDER			
<input style="width: 98%;" type="text"/>			
CARD NUMBER			EXPIRY DATE
<input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/>			<input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/>
SIGNATURE			DATE SIGNED
<input style="width: 95%;" type="text"/>			<input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/>