



**CORONA VIRUS (COVID – 19)**  
**CREDIT APPLICATION FORM**

I \_\_\_\_\_ (full name)

of \_\_\_\_\_ (business name)

Telephone: \_\_\_\_\_ (mobile)

Email: \_\_\_\_\_

Hereby request a credit for:

\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
(name of program/s). (date of program/s)

Reason/s:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Please note:**

Please allow up to 48 hours for our team to respond to your request. A full credit will be issued upon your request and this will be valid for 12 months. You will need to contact us when you are ready to re-book the same workshop.

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



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**Office Only:**

Request for credit note

- Approved
- Credit Note Raised – Xero
- Email issued confirming workshop credit approved
- Date Workshop re-booked \_\_\_\_\_

Approved by: \_\_\_\_\_

Signature: \_\_\_\_\_

Additional Notes:

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