



A Slice of Life
Empowering programs for young
adults with additional needs

Enrolment form – face-to-face courses

What course are you interested in attending?	
Your name	
Your address	
Your email address	
Your phone number	
Your date of birth	
Name and phone number of your NDIS plan manager	
Do you meet our course criteria of being 18 to 26 years old with mild intellectual disability?	
Are you able to travel independently to Botany to attend our courses?	
Are you able to manage your own medication and toileting needs?	
Have you read our Code of Conduct and do you agree to abide by the rules?	
Do you agree to pay the course fees before the course starts?	
Are you able to attend the course without a carer being present?	
Are you ready to have some fun and learn new skills?	

Signature _____ Date _____

When you've completed this form, please email to Christine@asliceoflife.com.au and we'll be in touch.

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www.asliceoflife.com.au