[Date]

Mr/s [Full name of person requesting training]  
[Position]  
[Club]

By email: [email]  
  
Dear [first name]

Letter of Agreement: Online AML/CTF Staff Awareness Training

This letter is to confirm enrolment of your staff into AML/CTF Staff Awareness Training.

Scope of works:  
student enrolment into the AML/CTF Staff Awareness Training:

* Number of participants: [Number] staff
* Fee: $100 plus GST per staff member

Please complete the staff enrolment list completely to ensure

Terms and Conditions:

1. The Training was developed with the appropriate level of care and skill, but all other warranties and indemnities are expressly excluded.
2. Payment of the Fee is due 30 days from date of receipt of invoice.
3. All intellectual property rights existing in the training program and any deliverables based on the program shall remain the property of ClubsNSW.

By signing below, you acknowledge and agree to the above terms and conditions.

Please return to lbucciarelli@clubsnsw.com.au signed and in word document format.

Agreed and duly executed by:

|  |  |
| --- | --- |
| The Registered Clubs Association of New South Wales, ABN 61 724 302 100, by its authorised representative: | [Club name], ABN XX XXX XXX XXX, by its authorised representative: |
| Daniel Mitchell – Manager, Gambling Policy | Name – Position |
| Date: [insert date] | Date: [insert date] |

Yours Sincerely  
Daniel Mitchell Clubs NSW

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Title | First name | Last name | Position | Club | email |
| *Mr* | *Luke* | *Bucciarelli* | *Compliance Manager* | *ClubsNSW* | *lbucciarelli@clubsnsw.com.au* |
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