



Recreational Services (Limitation of Liability) Act 2002

Business and Occupational Services

Level 3
Chesser House
91-97 Grenfell Street
Adelaide SA 5000

GPO Box 1719
Adelaide SA 5001
DX 225

Tel 08 8204 9686
Fax 08 8204 9697

www.ocba.sa.gov.au

Application to Register a Code of Practice

Name of Code _____

Date submitted / /



Fees (effective 1 July 2005)

Application to register a code	\$850)	Both fees are due and payable when submitting a Code of Practice for registration.
Registration of a code	\$350)	

Payment can be made by:

- cash/money order/eftpos transaction (in person)
- credit card (Visa, Mastercard, Bankcard) (see below)
- cheque (made payable to Commissioner for Consumer Affairs)



Paying in Person

Payment can be made in person at:
Office of Consumer and Business Affairs
Business and Occupational Services
Level 3, Chesser House
91-97 Grenfell Street, Adelaide SA 5000



Paying by Post

Payment can be forwarded by post to:
Attention: Assistant Project Officer
Office of Consumer and Business Affairs
Business and Occupational Services
GPO Box 1719, Adelaide SA 5001

Authorisation for Payment by Credit Card

Bankcard
 Visa
 Mastercard

Credit Card No.

Expiry Date
 /

Name on Card

Contact Phone No.

I hereby authorise the Commissioner for Consumer Affairs to draw on my credit card for the amount of \$

Cardholder's Name

Cardholder's Signature

Date / /



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Application to register an undertaking to comply with a Code of Practice

I _____
(full name of applicant)

on behalf of _____
(eg company / association)

trading as _____

(business name(s))

Postal address _____

Postcode _____

Telephone _____ Mobile _____

Fax number _____

E-mail address _____

Provide the following recreational service

I hereby apply to register an undertaking to comply with the following Code(s) of Practice

Code 1 _____
(state exact name listed on Code of Practice)

Code 2 _____
(state exact name listed on Code of Practice)

The recreational services that relate to each Code of Practice are

Code 1 _____
(as listed above)

Code 2 _____
(as listed above)

Applicant's signature

Date / /