

# ACCREDITATION RENEWAL APPLICATION

## To renew your program accreditation:

1. Complete this Renewal Application Form and send it to [register@physicalactivityaustralia.org.au](mailto:register@physicalactivityaustralia.org.au)
2. Arrange payment [via this secure online form](#)  
(please select RENEW program from the dropdown box)

## PROGRAM DETAILS

Name of Program: .....

Accreditation Number: KAP.....

Forthcoming Date/s for Program: .....

Delivery Method:  Face to face  Online  Correspondence  Blended

## PROGRAM PROVIDER DETAILS

Provider Name: .....

Contact Name: .....

Street Address: .....

Suburb: ..... State: ..... Postcode: .....

Phone: ..... Mobile: .....

Email: .....

Website: .....

## PAYMENT DETAILS

Payment number: ..... Amount paid: \$.....

Date payment made: ...../...../.....

## DECLARATION

I declare that all information provided in this application is true and correct. I have read and agree to abide by the terms and conditions available at [www.physicalactivityaustralia.org.au](http://www.physicalactivityaustralia.org.au). I understand that failure to comply with the terms and conditions may result in the withdrawal of my program accreditation.

...../...../.....

Name of person making declaration

Date