



# Metro On Central Application Form

Please fill in form fields below save and email application to: **info@metrooncentral.com**

Contact 0439 885551

Promotion Code:

Full Name*	Gender*
Mobile Number	
University /Tafe Campus*	DOB*

Your address / country*	Please supply one of the following Driving License Number / Passport Number*
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email address*
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Parents Guardians Name and address*	Parents Guardians phone Number*
	Do you smoke*
	Would you prefer to stay with*

Length of stay*	3x months \$250 (13x weeks)	<input type="checkbox"/>
	6x months \$235 (26x weeks)	<input type="checkbox"/>

Length of stay*	11x months \$230 (48x weeks)	<input type="checkbox"/>
	12x months \$225 (52x weeks)	<input type="checkbox"/>

Flatmate Preference
“Describe your personality”
Cleanliness

Date of arrival\* .....

Additional Information regarding flatmates you would prefer to stay with.

Require Linen Pack*
Require Car Park*