



**Mount Alexander
Community
Grants Project**

**Youth Driver Training Program
Expression of Interest**

Name:			
Address:			
Town:			Postcode:
Telephone:			
Date of Birth:			
Learner's Permit No.:			
Expiry Date:			

Please mail to:

Newstead RTC Bendigo Bank,
45 Lyons St.,
Newstead
Vic 3462

Or fax to 03 5476 2014