

Anglicare Australia Annual Conference 12 – 15 September 2010



Registration Form and Tax Invoice

Please note that this registration form is a tax invoice once payment has been completed.

SECTION 1 Personal details (delegate)

Title (Prof/Dr/Mr/Mrs/Ms) Given Name _____ Surname _____

Preferred Name on Badge _____

Position _____

Organisation _____

Address _____

City/Suburb _____ State _____ Postcode _____

Telephone _____ Fax _____

Mobile _____ Special needs (Dietary or other) _____

Email _____

SECTION 2 Delegate Registration

Before 30 July

	Early Bird	Standard	Daily Rate	
Member	<input type="checkbox"/> \$645	<input type="checkbox"/> \$695	<input type="checkbox"/> \$250	\$ _____
Non-Member	<input type="checkbox"/> \$745	<input type="checkbox"/> \$745	<input type="checkbox"/> \$275	\$ _____

As a fully registered delegate, the fees include all conference sessions, morning and afternoon teas and lunches.

A concession rate may be available to full members organisations whose operational income is less than 6 million.

Anglicare Reception and Award Ceremony
Monday 13th September \$40 \$ _____

Conference Dinner – Tuesday 14th September \$100 \$ _____

SECTION 3 Additional Tickets

No. of Tickets

Anglicare Australia Reception and Award Ceremony \$40 _____ \$ _____
– Monday 13th September

Conference Dinner – Tuesday 14th September \$100 _____ \$ _____

Total Accompanying Persons \$ _____

SECTION 4 Total Amount

Section 2 Delegate Registration \$ _____

Section 3 Additional Tickets \$ _____

TOTAL PAYMENT ENCLOSED \$ _____

SECTION 5 Payment

Method of Payment:

Payment of conference fees must accompany all registration forms. No registrations will be confirmed until payment is received.

Payment can be made by the following methods:

Cheques: Cheques should be made payable to Anglicare Australia.

Electronic Bank Transfer:

Bank: Bendigo Bank
BSB: 633 000
Account No: 109 660 092
Account Name: Anglicare Australia Incorporated

Please email or fax remittance advice to Melissa Dyson, Anglicare Australia.
Please note **delegate name** on the remittance.

Email: melissa.dyson@anglicare.asn.au
Fax: 02 6230 1704

Return your registration form and payment to:

Melissa Dyson
Anglicare Australia
GPO Box 1307
CANBERRA CITY ACT 2601

Telephone: 02 6230 1775 Fax: 02 6230 1704
Email: melissa.dyson@anglicare.asn.au
Website: www.anglicare.asn.au



Visit www.anglicare.asn.au for full conference details.