

REGISTRATION FORM

Before completing this form, please ensure you are aware of the cancellation policy.

PLEASE PRINT IN BLOCK LETTERS

One form per person. Photocopy if more than one person attending.

Register online at
www.vetelearn2008.com.au

TAX INVOICE

This form becomes a tax invoice upon payment. Date Issued: 13/10/08. ABN: 11 608 378 816

Title: (Mr/Mrs/Miss/Ms)

Given Name: (for name badge)

Surname:

Position:

Company/Organisation:

Postal Address:

State:

Postcode:

Phone: ()

Fax: ()

Mobile:

Email: (The only method of communication to delegates)

Special Requirements: Health/dietary/physical (Some dietary requirements may incur additional charges)

SECTION A - REGISTRATION

(All prices are in AUD and include GST)

As limited places are available your registration must include full payment to secure a place.
Registration forms received without payment will not be processed.

<input type="checkbox"/> Conference Registration – 24 November	REGISTRATION TOTAL	\$132
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PAYMENT

- I enclose a **cheque** for \$132 made payable to **Absolute Events & Marketing**
- I would like to **pay by EFT**. Please send me the bank account details
- Please **charge the Credit Card below for \$132:**
 - MasterCard Visa Amex
 - _____/_____/_____/_____
 - Expiry Date: _____
 - Cardholder's Name: _____
 - Cardholder's Signature: _____

POLICIES: Your registration must include full payment to secure a place. Registration forms received without payment cannot be processed. **Cancellation Policy:** Cancellations must be advised in writing to the Registration Office. Cancellations up to 7/11/08 will receive a refund of registration fees, less an administrative charge of \$20. Refunds after this date will be at discretion. **Privacy Notice:** The primary purpose for collecting personal information supplied on this form is to process your registration. These details will be used to keep you informed of future AFLF events, and on the Forum delegate listing provided to delegates and sponsors. If you **do not** wish your details to be used for this purpose, please tick. Do not publish my details. **Payment Policy:** It is a condition of registration that full payment is received prior to the commencement of the event. If this full payment is not received, delegates will not be admitted.

Return this form to: **Absolute Events & Marketing PO Box 858, Coorparoo Qld 4151**
OR Fax 07 3112 3900. Enquiries to: vetelearn2008@absoluteevents.com.au or 07 3394 2310 or 0404 488 910