Delegate Registration Form

Fax back to Caroline Jones 02 9680 8422

Delegate Information

Title: Brother □ Father □ Sister □ Prof □ Dr □ Mr □ Mrs □ Ms □ Other

First Name: ___________________________ Surname: ___________________________

Badge Name: ___________________________ Position: ___________________________

If different from above

Organisation

Address:

City: ___________________________ State: ___________________________

Postcode/Zip Code: ___________________________ Country: ___________________________

Tel: ( ) Fax: ( ) Mobile: ___________________________

Email: ___________________________

Dietary Requirements: ___________________________

Special Needs: e.g. Mobility ___________________________

Conference FULL Registration*

<table>
<thead>
<tr>
<th>Registration Type</th>
<th>Cost (GST Incl.)</th>
<th>Tick Box</th>
</tr>
</thead>
<tbody>
<tr>
<td>Early Bird Registration By 30 April 2010 - (Individual)</td>
<td>$869.00</td>
<td>□</td>
</tr>
<tr>
<td>Standard Registration From 1 May 2010 - (Individual)</td>
<td>$924.00</td>
<td>□</td>
</tr>
<tr>
<td>Early Bird Registration By 30 April 2010 - (Group of 5 Persons)**</td>
<td>$825.00</td>
<td>□</td>
</tr>
<tr>
<td>Standard Registration From 1 May 2010 - (Group of 5 Persons)**</td>
<td>$869.00</td>
<td>□</td>
</tr>
</tbody>
</table>

Total Cost: $ ___________

* A Full Registration includes: morning/afternoon teas, lunches and the Leadership Dinner

** A GROUP Full Registration must be booked and paid for as one group from the same organisation. Names can be given later, but you must book and pay for the registrations at the same time.

Catering Requirements

As a fully registered delegate, the Leadership Dinner (Tues 3rd August) is included in your registration fee. Please indicate whether you will be attending the dinner so we can cater correctly.

| Leadership Dinner - Tues 3rd August | □ I WILL attend the Leadership Dinner | □ I WON'T attend the Leadership Dinner |

Ref: ACU 2010 Delegate Registration Form
Day ONLY Registrations*** - Please indicate which day you will be attending

<table>
<thead>
<tr>
<th>Early Bird Day Registration (by 30.4.2010)</th>
<th>Standard Day Registration (From 1.5.2010)</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Mon 2nd August - $352.00</td>
<td>□ Mon 2nd August - $396.00</td>
</tr>
<tr>
<td>□ Tues 3rd August - $352.00</td>
<td>□ Tues 3rd August - $396.00</td>
</tr>
<tr>
<td>□ Wed 4th August - $242.00 – ½ Day</td>
<td>□ Wed 4th August - $286.00 – ½ Day</td>
</tr>
</tbody>
</table>

**Total Cost: $**

***A Day Registration means you will ONLY attend the conference on ONE day. The inclusions are morning/afternoon teas on the day you attend if these meals are relevant to the day you are attending.

Accommodation
Please select complete your accommodation requirements below.

<table>
<thead>
<tr>
<th>Hotel</th>
<th>Room Type</th>
<th>Rate per room per night (Room ONLY Rate)</th>
<th>Tick the room type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sofitel Wentworth</td>
<td>Classic Room</td>
<td>$210.00</td>
<td>□</td>
</tr>
<tr>
<td>Sofitel Wentworth</td>
<td>Club Sofitel Room</td>
<td>$330.00</td>
<td>□</td>
</tr>
</tbody>
</table>

Check In Date: ____________________________  Check Out Date: ____________________________

ETA (particularly if after 6pm): ____________________________

Any Special Requirements: _____________________________________________________________

PLEASE NOTE:
To secure your accommodation you will need to EITHER:
1. Provide PCC Event Management with the 1st night’s deposit
2. OR provide your credit card details for the hotel to guarantee the room against.

Accommodation deposits taken by PCC Event Management on behalf of delegates will be transferred to the Sofitel Wentworth Sydney two weeks prior to the event and applied to the individual room bookings.

Additional Tickets
If you require additional tickets please indicate which additional tickets you would like.

<table>
<thead>
<tr>
<th>Additional Tickets</th>
<th>Date</th>
<th>Cost (GST Inc.)</th>
<th>No. of Tickets</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accompanying Persons - Leadership Dinner</td>
<td>Tues 3rd Aug □</td>
<td>$135.00</td>
<td></td>
</tr>
<tr>
<td>Extra Exhibitor Day Pass</td>
<td>Mon 2nd Aug □</td>
<td>$75.00</td>
<td></td>
</tr>
<tr>
<td>Extra Exhibitor Day Pass</td>
<td>Tues 3rd Aug □</td>
<td>$75.00</td>
<td></td>
</tr>
<tr>
<td>Extra Exhibitor Day Pass</td>
<td>Wed 4th Aug □</td>
<td>$20.00</td>
<td></td>
</tr>
</tbody>
</table>

**Total Cost: $**
Delegate Listing
A delegate list will be available at the Conference which will have the following fields:

- Name, Organisation, Position, State, Country, Phone, Email

If you DO NOT wish for your details to appear on the listing, please tick the box below.

☐ Please remove my name from the delegate listing.

Payment Summary

<table>
<thead>
<tr>
<th>Item</th>
<th>Cost (GST Incl.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Conference (Full or Day) Registration</td>
<td>$</td>
</tr>
<tr>
<td>Catering Requirements Completed</td>
<td>□ Yes</td>
</tr>
<tr>
<td>Concurrent Sessions Completed</td>
<td>□ Yes</td>
</tr>
<tr>
<td>Accommodation</td>
<td>$</td>
</tr>
<tr>
<td>Additional Tickets</td>
<td>$</td>
</tr>
<tr>
<td><strong>Total Fee Due:</strong></td>
<td><strong>$</strong></td>
</tr>
</tbody>
</table>

Credit Cards

☐ Visa
☐ MasterCard

Card Number: ______________________________________________________________

Expiry Date: __________ CVN: _______________ 3 digit security code on back of card or 4 digit code on front for Amex

Total $: _____________________

Cardholder’s Name: (PRINT): ________________________________________________

Cardholder’s Signature: ____________________________________________________

Cheques

Please make cheques payable to:

PCC Event Management

Post to the Event Manager:

Ms Caroline Jones
PCC Event Management

70 Tuckwell Road
CASTLE HILL NSW 2154
AUSTRALIA

E: caroline.jones@optusnet.com.au
T: +61 2 8677 3428
F: +61 2 9680 8422

Electronic Funds Transfer

Bank: ANZ Bank
Branch: Castle Hill
BSB: 012 263
Account #: 1815 74125
Account Name: PCC Event Management
Bank Address: 287 Old Northern Road
Castle Hill NSW 2154, Australia
Swift Code: ANZBAU3M

If paying by Electronic Funds Transfer, please email or fax your Remittance Advice.