

Event registration form and tax invoice*

2010 Economic and Political Overview

Thursday 3 March 2011, 9.30am to 2.00pm, Perth Convention and Exhibition Centre



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| To register | Registrations close 5pm, Thursday 24 February (unless sold out prior). Fax 08 6270 4469 Email jenn.hammond@ceda.com.au Post PO Box 5631, St Georges Tce, Perth WA 6831 <ul style="list-style-type: none">Confirmation of registration will be given <u>one week before the event</u>. Please contact us after that time if your registration has not been confirmed. Enquiries phone Jenn Hammond on 61047102 | |
| Registration Options <i>(prices include GST)</i> | CEDA members and guests | Non Members |
| | Morning + Lunch <input type="checkbox"/> \$290.00 per person <input type="checkbox"/> \$2700.00 for 10 seats | <input type="checkbox"/> \$390.00 per person <input type="checkbox"/> \$3700.00 for 10 seats |
| | Lunch Only (12.00 – 14.00) <input type="checkbox"/> \$145.00 per person <input type="checkbox"/> \$1350.00 table x 10 | <input type="checkbox"/> \$195.00 per person <input type="checkbox"/> \$1850.00 table x 10 |
| Payment options | Full payment is required before the event. <input type="checkbox"/> Cheque I enclose a cheque made payable to CEDA for \$ _____ <input type="checkbox"/> EFT Please email jenn.hammond@ceda.com.au with remittance advice quoting reference 6/030311 Account name: Committee for Economic Development of Australia Bank: NAB, 330 Collins Street, Melbourne 3000 BSB: 083 004 Account No: 515113346 <input type="checkbox"/> Credit card <input type="checkbox"/> MasterCard <input type="checkbox"/> Visa <input type="checkbox"/> Amex <input type="checkbox"/> Diners Club Credit card number _____ Expiry date _____ Amount \$ _____ Name on Card _____ | |
| | CEDA ABN 49 008 600 922 *This form becomes a tax invoice/receipt when you make payment. A separate tax invoice will not be issued. | |
| Confirmation | <ul style="list-style-type: none">Please provide an email address below in order for us to forward written confirmation of your registration, which will be sent approximately one week before the event.Please contact us if you do not receive confirmation.If registrations are closed you will be contacted immediately. | |
| Registration details | First name _____ Last name _____ Position _____ Company _____ Phone _____ Email _____ Dietary requirements _____ | |
| | First name _____ Last name _____ Position _____ Company _____ Phone _____ Email _____ Dietary requirements _____ | |
| | Please photocopy this form if you are registering more than two delegates. | |
| Corporate tables | <ul style="list-style-type: none">Please supply contact details of the organiser of the corporate table on your registration form. A confirmation email will be sent, and your complete list of guest details will be required by <u>24 February 2011</u>. | |
| Cancellation policy | <ul style="list-style-type: none">Cancellations received by <u>5.00pm 24 February 2011</u> will be refunded in full.Full payment is required for any cancellation received after this date or for non-attendance on the day.Substitutions may be made at any time.All cancellations and changes must be forwarded in writing (by email or fax). | |
| Privacy | <ul style="list-style-type: none">CEDA collects this information to conduct our business, and it will not be passed to other organisations.Photography and audio recording may take place at CEDA events and may be reproduced in CEDA publications or on our website. | |