



QUEENSLAND WOUND CARE ASSOCIATION INC.

QWCA 2010 WOUND MANAGEMENT SEMINAR / AGM 20 & 21 AUGUST 2010 HERVEY BAY BOAT CLUB

Ref

Delegate Registration Form

PLEASE COMPLETE ONE REGISTRATION FORM PER DELEGATE

A. DELEGATE INFORMATION (please use CAPITAL letters and print clearly)

Title (Prof/Assoc Prof/Dr/Mr/Mrs/Ms/Miss) _____ Last Name _____ First Name _____
 Organisation _____ Position _____
 Postal Address (Number/Street) _____
 Suburb _____ State _____ Postcode _____
 Telephone BUS. (_____) _____ Fax BUS. (_____) _____
 Telephone HOME. (_____) _____ Mobile (_____) _____
 Email _____
 Name to appear on name badge (if different from above) _____
 Special Dietary or Other requirements _____

Are you a QWCA member? Yes No Please send me membership information
 Have you attended a QWCA Conference before? Yes No

Privacy Collection Notice

The primary purpose for collecting personal information you supply on this form is to process your registration. We will only use these details to keep you informed of future events and information regarding the seminar and to provide your details to attendees/sponsors/trade exhibitors of this seminar only (subject to strict conditions). If you **DO NOT** wish your details to be made known, please tick here.

B. CONFERENCE REGISTRATION

Please select the registration option you require below and complete the "Total Registration Fees" at the bottom. QWCA is *not registered* for GST and *no GST* has been added to Registration Costs.

FULL CONFERENCE DELEGATE REGISTRATION OPTIONS	COST PER PERSON	TOTAL PAYABLE
<input type="checkbox"/> Member – Early Bird Full Registration (register by 20 July 2010)	\$ 160.00	\$ _____
<input type="checkbox"/> Non-Member – Early Bird Registration (register by 20 July 2010)	\$ 260.00	\$ _____
<input type="checkbox"/> Member – Standard Full Registration	\$ 180.00	\$ _____
<input type="checkbox"/> Non-Member – Standard Full Registration	\$ 280.00	\$ _____

DAY DELEGATE REGISTRATION OPTIONS

Please indicate which day you will be attending Friday 20 August Saturday 21 August

<input type="checkbox"/> Member – Early Bird Day Registration (register by 20 July 2010)	\$ 120.00 per day	\$ _____
<input type="checkbox"/> Non-Member – Early Bird Day Registration (register by 20 July 2010)	\$ 220.00 per day	\$ _____
<input type="checkbox"/> Member – Standard Day Registration	\$ 140.00 per day	\$ _____
<input type="checkbox"/> Non-Member – Standard Day Registration	\$ 240.00 per day	\$ _____

1 TOTAL REGISTRATION FEES \$ _____

C. QWCA DINNER (Fraser Room, Hervey Bay Boat Club)

Please note: Dinner is **not included** in the Registration Fee. Optional Dinner on Friday evening is \$35.00 (beverages not included). Guests are welcome. Please complete the section below. NOTE – if you are bringing a guest, please provide their name and special dietary/other requirements. QWCA is *not registered* for GST and *no GST* has been added to registration costs.

	COST PER PERSON	TOTAL PAYABLE
<input type="checkbox"/> QWCA Dinner – Friday 20 August	# required _____ @ \$ 35.00 each	\$ _____

2 TOTAL QWCA DINNER FEES \$ _____

Guest Name _____ Special Dietary Requirements _____

D. ACCOMMODATION SELECTION

If you require accommodation in Hervey Bay, please tick your preferred hotel option. **Payment of all nights' accommodation costs is required at the time of booking.** Payment for all hotel incidentals (phone, mini-bar etc) must be settled by individuals directly with the hotel on check out.

- I WILL MAKE MY ACCOMMODATION BOOKING THROUGH MY TRAVEL HUB (PLEASE PROCEED DIRECTLY TO PAYMENT SECTION)
- I WOULD LIKE THE QWCA SECRETARIAT TO BOOK ACCOMMODATION FOR ME (PLEASE COMPLETE THE FOLLOWING SECTION - THESE RATES CAN ONLY BE OBTAINED BY BOOKING ON THIS FORM AND ARE SUBJECT TO AVAILABILITY AT TIME OF BOOKING)

BreakFree Great Sandy Straits (7 minute walk to Boat Club / Seminar Venue)

		1 Night Stay (per room/night)	2+ Night Stay (per room/night)
ONE BEDROOM APARTMENT (1 x Queen Bed)	(1-2 people)	<input type="checkbox"/> \$ 175.00	<input type="checkbox"/> \$ 127.00
TWO BEDROOM APARTMENT (1 x Queen Bed + 2 x Single Beds)	(1-4 people)	<input type="checkbox"/> \$ 256.00	<input type="checkbox"/> \$ 182.00
THREE BEDROOM APARTMENT (1 x Queen Bed + 1 x Double Bed + 2 x Single Beds)	(1-6 people)	<input type="checkbox"/> \$ 295.00	<input type="checkbox"/> \$ 209.00

Mantra Hervey Bay (2 minute walk to Boat Club / Seminar Venue)

		1 Night Stay (per room/night)	2+ Night Stay (per room/night)
HOTEL ROOM (1 x King Bed OR 2 x Single Beds)	(1-2 people)	<input type="checkbox"/> \$ 136.00	<input type="checkbox"/> \$ 115.00
ONE BEDROOM APARTMENT (1 x King Bed OR 2 x Single Beds)	(1-2 people)	<input type="checkbox"/> \$ 163.00	<input type="checkbox"/> \$ 139.00

E. ROOM PREFERENCES / SPECIAL REQUESTS

- SINGLE / DOUBLE TWIN SHARE SMOKING NON SMOKING

Name of Sharer/s (if applicable)

Which sharer is paying the accommodation fees?

Special Requests

Check-In Date Check-Out Date Total Nights

③ ACCOMMODATION PAYABLE (Full cost) \$

F. SUMMARY OF REGISTRATION FEES PAYABLE

Please transfer the total amounts payable from the sections above.

① REGISTRATION FEES \$ **②** + QWCA DINNER \$ **③** + ACCOMMODATION \$

= TOTAL AMOUNT PAYABLE \$

G. TERMS & CONDITIONS

All changes and cancellations to registrations and accommodation need to be made in writing to the QWCA Secretariat. Do not submit another registration form.

Registration: Registration can be transferred to another person. Please forward all details in writing to the QWCA Secretariat. Cancellations made between 1 July – 30 July 2010 will incur a \$100.00 Administration fee. Cancellations after 30 July 2010 will not be refunded.

Accommodation: Cancellations made between 30 days and arrival may be charged full accommodation costs.

H. PAYMENT DETAILS

A confirmation letter and invoice will be forwarded to you upon receipt and processing of this form. Full payment of registration fees and accommodation **MUST** be received at the time of booking. Please identify your chosen payment method below. QWCA is *not registered* for GST and *no GST* has been added to registration or accommodation costs.

- DIRECT DEPOSIT (please fax remittance)
Account Name: Queensland Wound Care Association Inc. **Bank:** ANZ BSB # 014-219 **ACC #** 2558 59773 **Payment Reference:** Your Name
- CHEQUE – MADE PAYABLE TO: Queensland Wound Care Association Inc.
- CREDIT CARD MasterCard VISA

Card number:/...../...../..... Exp date/..... Amount: \$

Name on Card: Signature:

Queensland Wound Care Association Inc
 ABN: 76 083 914 244
 A confirmation of registration will be provided in writing within 7 days of receipt of registration.

Please return this form to:
 QWCA Secretariat
 C/O Cre8it Events
 Fax: +61 7 3319 6094
 Or mail: PO BOX 155, Wynnum QLD 4178
 Telephone: +61 7 3348 7380
 E-mail: info@cre8itevents.com.au