

REGISTRATION FORM

TAX INVOICE

Please read:

- Return completed form with accompanying payment to:
On Q Conference Support, PO Box 3711 WESTON CREEK ACT 2608 or fax to 02 6161 4719
- A separate form must be used for each delegate.
- Delegates may also **REGISTER ONLINE** by accessing the website <http://www.onqconferences.com.au/events/APDT2010.php>
- By submitting your registration you agree to the terms and conditions of the accommodation and standard cancellation policies.
- Please contact On Q Conference Support, Email: apdt@onqconferences.com.au, or telephone 02 6288 3998 if you have any problems.

ABN 93 835 779 670

ALL PRICES INCLUDE GST

SECTION 1: PERSONAL DETAILS

Title: _____ First name: _____ Surname: _____

Address: _____

City: _____ State: _____ Postcode: _____ Work Home

Telephone: (w) _____ (h) _____

Fax: _____ Email: _____

Delegate List Consent

Your name and email details as given in this form (and any subsequent amendment) will be included in the Delegate List produced for the Conference which will be supplied to organising bodies, sponsors, exhibitors and all delegates attending the Conference.

Please tick if you **do not** consent to inclusion of your details on the Delegate List.

SECTION 2: SPECIAL REQUIREMENTS

If you have specific requirements please indicate below. We will endeavour to cater to your needs.

Dietary Requirements: _____ Mobility: _____

SECTION 3: REGISTRATION FEES

- Conference Registration fees include morning tea, lunch and afternoon tea each day.
- APDT Australia members MUST be financial for 2010/11 to be eligible for the member rate. If you are unfinancial, please pay your membership prior to registration through the APDT website. Once paid you may register as a financial member.
- Full time Vet Nursing or Vet Science students attend at member prices. Please enclose a photocopy of your TAFE or University student ID card when registering to receive this discount.
- **Non Member rates include optional Associate membership of APDT for 2010/11.** If you are registering as a non member and wish to take up Associate membership, you will be required to complete an official APDT membership form to accompany the registration. This is necessary to comply with legislative requirements for membership. Please go to the APDT website - <http://www.apdt.com.au>

| All prices GST inclusive \$AUD | CONFERENCE REGISTRATION | | DAY REGISTRATION | | | |
|--------------------------------|--------------------------------|--------------------------------|---|--------------------------------|--------------------------------------|--------------------------------------|
| | Early Bird | Full Rate (After 31 August) | Please tick days of attendance ... <input type="checkbox"/> Fri <input type="checkbox"/> Sat <input type="checkbox"/> Sun | | | |
| | | | Early Bird 1-day | Early Bird 2-day | Full Rate 1-day (After 31 August) | Full Rate 2-day (After 31 August) |
| APDT Member | <input type="checkbox"/> \$405 | <input type="checkbox"/> \$440 | <input type="checkbox"/> \$180 | <input type="checkbox"/> \$300 | <input type="checkbox"/> \$200 | <input type="checkbox"/> \$340 |
| Non APDT Member ** | <input type="checkbox"/> \$450 | <input type="checkbox"/> \$485 | <input type="checkbox"/> \$235 | <input type="checkbox"/> \$350 | <input type="checkbox"/> \$255 | <input type="checkbox"/> \$370 |

Total AUD \$ _____

SECTION 4: CONFERENCE DINNER

Halloween Party, Saturday evening : 7.00pm for 7.30pm

YES, I would like to buy _____ tickets @ \$55 per person (Food only, drinks purchased separately) Total AUD \$ _____

Pre-Conference trip to the Zoo : Thursday 28 October 2010 (cut-off date for registering 1 October 2010)

YES, I would like to buy _____ tickets @ \$65 per person including transport
 YES, I would like to buy _____ tickets @ \$45 per person own transport Total AUD \$ _____

Pre-Conference First Aid Workshop : Thursday 28 October 2010 (cut-off date for registering 15 October 2010)

YES, I would like to buy _____ tickets @ \$50 per person Total AUD \$ _____

SECTION 5: STREAM PREFERENCE (SATURDAY 30 AND SUNDAY 31 OCTOBER)

Places in streamed sessions are limited and allocated in order of registrations received. Please number your preferences below:

Sat 1.45pm - _____T. Theakstone: Is profit a dirty word _____T. Crich: What's new puppy dog? _____K. Ramirez: Concept training
 Sat 3.45pm - _____D. Millikan: People skills for dog people _____S. White: Five easy pieces _____K. Ramirez: Concept training cont'd
 Sun 11.00am - _____K. Ramirez: Cross species training _____S. White: Raising the bar _____P. Clarke: The choice is yours

SECTION 6: ACCOMMODATION (Please ensure you read the accommodation refund/cancellation policy below).

If you should prefer accommodation other than that listed below, please don't hesitate to call On Q Conference Support on 02 6288 3998. If you do decide to pay the full amount at the time of registration, refunds will be provided for any changes up until 7 days out from the event. Any outstanding balance for incidentals are then to be settled with the hotel upon check out.

Date In: _____ **ETA:** _____ **Date Out:** _____

Smoking Non-Smoking

I will be accompanied by, or have arranged to share with: _____

| Hotel | Room Type <i>(please circle room type)</i> | Cost | Preference |
|---|---|----------|------------|
| Travelodge Hotel 8 Greenfield Parade Bankstown NSW 2200 www.travelodge.com.au | Single / Double / Twin Standard room | \$145.00 | _____ |
| | Single / Double / Twin Standard room + 1 breakfast | \$157.00 | _____ |
| | Single / Double / Twin Standard room + 2 breakfast | \$167.00 | _____ |

Deposit Total AUD \$ _____

Please complete the following:

I will be paying for the full booking, _____ night(s) with this registration.

Please hold my credit card details for payment of all accommodation 14 days prior to the event.

ACCOMMODATION REFUND/CANCELLATION: Any cancellations of accommodation must be made in writing to the Conference Organiser 14 days prior to the Conference (15 October 2010). Please note that if you provide credit card details and cancel after 15 October, the hotel is entitled to deduct one nights accommodation in lieu.

CONFERENCE CANCELLATION: All refunds must be requested in writing. An administration fee of \$30 will be charged for cancellations. No refunds will be granted after 30 September 2010. Neither APDT Australia nor the Conference Organiser are responsible for any loss or damage as a result of alteration to the program, cancellations or postponement of the conference due to unforeseen occurrence or any other event that results in staging of the conference being impractical or impossible. If APDT Australia is forced to cancel the conference due to unforeseen circumstances, it will only be liable to reimburse the conference fee. Delegates are encouraged to take out their own insurance as necessary to cover potential losses.

SECTION 7: PAYMENT SUMMARY

TAX INVOICE

ABN: 93 835 779 670

| | |
|----------------------------|-------------|
| Registration Fees | AUD\$ _____ |
| Conference Dinner | AUD\$ _____ |
| Zoo Trip | AUD\$ _____ |
| First Aid Workshop | AUD\$ _____ |
| Accommodation | AUD\$ _____ |
| GRAND TOTAL TO PAY: | AUD\$ _____ |

Payment:

Enclosed is my cheque *(made payable to On Q Conference Support (Principal Doreen Culliver))*

I am faxing my requirements, payment will follow by mail.

Direct Deposit (EFT) to account details below and please provide faxed confirmation of the deposit:

Account Details: BSB: 06 2912 Account No: 1015 3163 Name: On Q Conference Support

Date of direct deposit: _____ / _____ / _____ Reference Code: _____

Please charge my credit card. Is this a corporate card? Yes No

Type of card: VISA MC

Number on card: _____ / _____ / _____ / _____ Expiry date: _____ / _____

Name of cardholder: _____

Signature of cardholder: _____

On Q Conference Support
PO Box 3711, Weston ACT 2611
T: (02) 6288 3998 F: (02) 6161 4719
E: apdt@onqconferences.com.au

| |
|---|
| OFFICE USE: Rec'd _____/_____/_____ |
| Processed: _____ Confirmation sent _____/_____/_____ |
| Follow up: _____ |