

# 2016 Conference Delegate Registration form

ABN: 79 008 455 758

**12th - 14th October 2016**

**TAX INVOICE**

**Personal Details** (please print clearly)

Title: \_\_\_\_\_ Given name: \_\_\_\_\_ Surname: \_\_\_\_\_

Preferred Name for badge: \_\_\_\_\_ Job title: \_\_\_\_\_

Company: \_\_\_\_\_ Work Ph: \_\_\_\_\_

Billing address: \_\_\_\_\_

Email: \_\_\_\_\_ Dietary needs: \_\_\_\_\_

**Registration and fees** (All prices include GST) - Conference Registration includes dinner

Event	Member	Price	Non-Member	Price
<b>Conference &amp; Leadership Forum Combined</b>	<input type="checkbox"/> From 1/9/16	\$1550	<input type="checkbox"/> From 1/9/16	\$1890
<b>Conference Only</b>	<input type="checkbox"/> From 1/9/16	\$1270	<input type="checkbox"/> From 1/9/16	\$1560
<b>Leadership Forum Only</b>	<input type="checkbox"/> From 1/9/16	\$390	<input type="checkbox"/> From 1/9/16	\$490
<b>President's Dinner</b>	Please indicate if you are attending the President's Dinner (included in conference registration fee): <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>President's Dinner Only</b> (being held offsite at Movie World)	Thursday 13th October 2016	<input type="checkbox"/> \$195 Per Person		
Please indicate if you will like <b>transport</b> to and from <b>Movie World</b> <input type="checkbox"/> Yes <input type="checkbox"/> No		Please indicate what <b>bus</b> you will be on coming back to <b>Sea World</b> <input type="checkbox"/> 10:00pm <input type="checkbox"/> 11:00pm <input type="checkbox"/> 12:00am		
<b>Golf Day</b> - Tuesday 11 October 2016, Hope Island Golf Course		<input type="checkbox"/> \$125 Per Person	<input type="checkbox"/> \$500 Team of 4.	

Please find enclosed cheque of \$..... **OR** I authorise \$..... to be deducted from my credit card

Cheque  Mastercard  Visa  Amex Card No: | | | | | | | | | | | | | | | | | | | | | |

Security No.: ..... Exp. Date: ...../..... Cardholder's Name: ..... Signature: .....

**EFT Details:** Commonwealth Bank, Artarmon BSB 062 104 Account no 1003 9560. **Fax** this full page to AICM 02 9906 5686 to confirm your conference attendance. **Or post to:** Australian Institute of Credit Management - Suite 303, 1-9 Chandos Street, St Leonards NSW 2065

