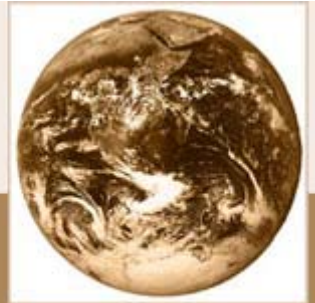




MAPW National Conference

August 6-7, 2005 - The University of Melbourne



Conference Registration Form

Note: All rates are quoted in Australian Dollars (AU\$) inclusive of GST.

A form must be completed for each registrant.

TAX INVOICE for GST Purposes

PERSONAL DETAILS – Please print

(Ms/Mrs/Mr/Dr/Prof) Family name: _____ Given name/s: _____

Preferred name for tag: _____

Department: _____

Organisation: _____

Address: _____

City: _____ State: _____ Postcode: _____ Country: _____

Tel:(_____) _____ Fax:(_____) _____ Email: _____

CONFERENCE REGISTRATION FEES – Please tick the appropriate box

	Full	1 Day	½ Day
Student Registration	<input type="checkbox"/> \$80	<input type="checkbox"/> \$40	n/a
Standard Registration*	<input type="checkbox"/> \$380	<input type="checkbox"/> \$200	<input type="checkbox"/> \$110
Concession Registration**	<input type="checkbox"/> \$250	<input type="checkbox"/> \$130	<input type="checkbox"/> \$75

Registration Fee AU\$ _____

*Anyone enrolled in a full-time programme of study is eligible for the student rate. The registration form must be accompanied by a copy of the Student ID card or a letter from the participant's supervisor or Head of School confirming this status.

** Concession registration for Retired Members of MAPW only.

NOTE: Registration fee **includes** working lunch on both days (Saturday & Sunday) for Full and 1 Day participants only. Conference Dinner is **not included** in Registration.

SOCIAL EVENTS

Conference Dinner (Sat 6 August) Rydges Carlton Hotel

Dinner Ticket \$80
Students & Concession Ticket \$70

Additional Tickets _____ @ \$80

Total Social Events Fee AU\$ _____

SPECIAL REQUIREMENTS

Do you require **Special Assistance** to be able to fully participate in the Conference? *Please indicate:* _____

Do you have **Special Dietary Requirements**? * *Please indicate:* _____

* we may not be able to provide for all dietary requirements.

PRIVACY

Do you agree to have your contact details included on the delegate list? Yes No

SUPPORT

I am willing to offer an additional \$_____ to assist in subsidising the cost of students attending this conference.

PAYMENT DETAILS

A + **B** TOTAL PAYMENT DUE \$ _____

Payment Method - *Please tick appropriate box*

Cheque/Money Order enclosed. Cheques must be in Australian Dollars and made payable to University of Melbourne – MAPW 05.

Payment by credit card:

MasterCard Visa Bankcard

Card number:

Card holder's name [please print] _____

Signature _____ Expiry Date: /

Please send registration form with payment to:

MAPW Conference 2005

Conference Management

Old Physics Building

The University of Melbourne

Victoria, Australia, 3010

Telephone: (+61 3) 8344 6107 Fax: (+61 3) 8344 6122

Email: sa-conference@unimelb.edu.au

Website: <http://www.conferences.unimelb.edu.au/mapw2005>

Registration Cancellation Policy

Cancellation of a registration must be notified in writing to Conference Management. Cancellations prior to 15 July 2005 will receive a full refund less \$110 administration fee. No refund will be given for cancellation after 15 July 2005, however substitutions will be possible.

PLEASE KEEP A COPY OF YOUR REGISTRATION DETAILS