

Registration Form

Islands of Ageing

43rd National Conference of the Australian Association of Gerontology
17th – 19th November 2010 Hotel Grand Chancellor, Hobart, Tasmania



(Please complete one form for each delegate. Please ensure that you have read and accept the registration terms and conditions before submitting your registration.)

Title:	Given Name:	Surname:
Preferred Name on Name Badge:		
Position:		
Organisation:		
Postal Address:		
City / Suburb:	State:	Postcode:
Daytime Phone:	Mobile:	
Fax:	Email:	
Billing Address* (write "as above" if same)		
Dietary / Special Requirements:		
Please indicate your preferred method of correspondence: <input type="checkbox"/> Post <input type="checkbox"/> Email		
<input type="checkbox"/> Please tick this box if you DO NOT want your details to appear on a list of delegates		

TAX INVOICE All prices include GST AAG National Conference ABN: 13 421 052 997

* All invoices and receipts will be sent directly to the nominated Billing Address. Once paid, this registration form is recognised by the Australian Taxation Office as a compliant Tax Invoice

CONFERENCE REGISTRATION	AAG Member (Member Number: _____)	AAG Non Member	Total
'Earlybird' Full Registration (up to 24th September 2010) Includes all Conference Sessions, Welcome Reception and Farewell Reception. Does not include Conference Dinner.	\$620	\$770	\$
Regular Full Registration (after 24th September 2010) Includes all Conference Sessions, Welcome Reception and Farewell Reception. Does not include Conference Dinner.	\$710	\$880	\$
Concession Full Registration Includes all Conference Sessions, Welcome Reception and Farewell Reception. Does not include Conference Dinner.	\$370	\$470	\$
Day Registration Includes conference sessions for one day only. Excludes all Social Functions. WEDNESDAY or THURSDAY or FRIDAY	\$335	\$395	\$
Concession Day Registration Includes conference sessions for one day only. Excludes all Social Functions. <input type="checkbox"/> WEDNESDAY or <input type="checkbox"/> THURSDAY or <input type="checkbox"/> FRIDAY	\$150	\$190	\$
Optional Extra - Pre Conference Workshop #1 (Tues)	\$60	\$60	\$
Optional Extra - Pre Conference Workshop #2 (Tues)	\$50	\$50	\$
Optional Extra - Breakfast (Thurs)	\$45	\$45	\$
TOTAL			\$

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SOCIAL FUNCTIONS - Additional Tickets & Optional extras	Ticket Price	Total
Additional Ticket – Welcome Reception (Wednesday 17th) The Welcome Reception is included with all Full Registration types.	\$50	\$
Optional Extra –Conference Dinner (Thursday 18th) This is an optional extra, and is not included with any registration type.	\$150	\$
Additional Ticket – Farewell Reception (Friday 19th) The Farewell Reception is included with all Full Registration types.	\$20	\$
TOTAL		\$

ACCOMMODATION BOOKING

The deadline for accommodation bookings via this registration form is **Wednesday 13th October 2010**

All rates quoted are per room, per night and do not include breakfast. All rates include GST. For detailed property and room descriptions, please refer to the conference website www.aagconference.com or the registration brochure. Please read accommodation bookings and conditions before making your booking. All bookings are subject to availability.

Hotel	Room Type	Room Rate	Check In Date	Check Out Date	Number of Nights
Hotel Grand Chancellor Hobart	<input type="checkbox"/> Mountain View Room	<input type="checkbox"/> \$195			
	or <input type="checkbox"/> Harbour View Room	<input type="checkbox"/> \$230			
TOTAL ACCOMMODATION:					\$
(Minimum one night's deposit or credit card details required)					
I will be sharing with:				Number of People:	

PAYMENT DETAILS

Registration Fee Total:	\$
Social Functions Total:	\$
Accommodation Total:	\$
TOTAL TO PAY:	\$

PAYMENT: (All prices include GST)

ABN: 13 421 052 997

Cheque or **Money Order** enclosed (Payable to: 'AAG National Conference')

Electronic Deposit

BSB: 082-551 Account Number: 59 561 8247 Account Name: AAG National Conference Bank: National Australia Bank
Please email remittance advice to jayne@eastcoastconferences.com.au as soon as payment has been made.

Credit Card Payment

Card Type: MasterCard Visa Expiry Date: /

Card Number:

Name on Card:

Signature:

Please complete form and return with payment to:

AAG National Conference C/- East Coast Conferences PO Box 848, Coffs Harbour NSW 2450

Phone: 02 6650 9800 Fax: 02 6650 9700 Email: aag@eastcoastconferences.com.au Conference website: www.aagconference.com



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