REGISTRATION FORM

4TH INTERNATIONAL CONFERENCE FOR PERIANAESTHESIA NURSES

1ST – 4TH NOVEMBER 2017
LUNA PARK, SYDNEY, NSW, AUSTRALIA

tides of change

(please complete one form for each delegate)

Title (Mr/Ms/Mrs/other) First Name Surname

Preferred Name on Badge Position

Organisation

Postal Address

Suburb Postcode State Country

Daytime Phone Mobile Email

Billing Address*: (write "as above" if same)

*** All invoices and receipts will be sent directly to the nominated Billing Address.**

Dietary / Special Requirements

☐ Please tick this box if you DO NOT want your details to appear on a list of delegates

TAX INVOICE

ALL PRICES ARE IN AUSTRALIAN DOLLARS AND INCLUDE GST
AUSTRALIAN COLLEGE OF PERIANAESTHESIA NURSES ABN 46 942 030 874
ONCE PAID, THIS REGISTRATION FORM IS RECOGNISED BY THE AUSTRALIAN TAXATION OFFICE AS A COMPLIANT TAX INVOICE.

Conference Registration	'Early' Registration (by 30th June 2017)	Regular Registration (after 1st July 2017)	Total
Speaker Full Registration Available to oral presenters only. Includes all conference sessions, one ticket to the Welcome Reception, morning & afternoon tea breaks and lunches for each conference day. Please indicate your attendance at the Welcome Reception ☐ I will be attending the Welcome Reception ☐ I will not be attending the Welcome Reception	$600	$720	$
Full Registration Includes all conference sessions, one ticket to the Welcome Reception, morning & afternoon tea breaks and lunches for each conference day. Please indicate your attendance at the Welcome Reception ☐ I will be attending the Welcome Reception ☐ I will not be attending the Welcome Reception	$750	$900	$
Day Registration Includes conference sessions, morning & afternoon tea break and lunch for your nominated day only. Does not include social functions ☐ Thursday ☐ Friday	$340	$400	$
Half Day Registration Includes conference sessions and one refreshment break on day of attendance only. Does not include conference bag and materials. ☐ Wednesday ☐ Saturday	$150	$175	$
		TOTAL REGISTRATION FEES:	**$**

ACCOMMODATION BOOKING:

THE DEADLINE FOR ACCOMMODATION BOOKINGS VIA THIS REGISTRATION FORM IS 1ST SEPTEMBER 2017

All rates quoted are room only, per night for maximum of 2 people. For detailed property and room descriptions, please refer to the conference website www.icpan2017.com.au 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
North Sydney Harbourview Hotel	☐ Queen Harbourview Room (not including breakfast)	☐ $245			
Rydges North Sydney	☐ Parkview Queen Room (not including breakfast)	☐ $275			
				TOTAL ACCOMMODATION:	**$**

Social Functions	Number of Tickets	Cost per Ticket	Total
Additional ticket – Welcome Reception (Wednesday 1st November 2017) Note: This function is included with all Full Registrations. Additional tickets can be purchased here for day delegates and guests		$70	$
Conference Dinner – Optional Extra (Friday 3rd November 2017) Note: this is an Optional Extra, and is not included in the conference registration fee		$150	$
		TOTAL SOCIAL FUNTIONS:	**$**

PAYMENT DETAILS:

Registration Fee Total: $_____

Social Functions Total: $_____

Accommodation: $_____

TOTAL TO PAY: **$_____**

PAYMENT OPTIONS:

☐ **Cheque** or money order enclosed (payable to: 'ICPAN 2017 Conference')

or

☐ **Electronic deposit**

(BSB: 082-551 Account Number: 85-270-9431 Bank Name: National Australia Bank SWIFT Code: NATAAU33025
Account Name: ICPAN 2017 Conference Bank Address: Harbour Drive, Coffs Harbour, NSW, Australia)

All bank charges and fees for electronic funds transfer must be paid by the delegate. The full amount of the registration fee must be received.

or

☐ **Credit Card payment**

Type of card ☐ Mastercard ☐ Visa Expiry Date:...../.....

Card Number _____

Name on card _____

Signature of card holder_____

2.5% surcharge applies to all credit card payments

Please return form to: ICPAN 2017 Conference Managers

East Coast Conferences

02 6650 9700 | PO Box 848 Coffs Harbour NSW 2450

02 6650 9800 | jayne@eastcoastconferences.com.au

0423 497 038 | www.icpan2017.com.au

Please ensure you read and understand the Registration Conditions outlined on the conference website before submitting this registration form.