

UNITING CANCER PAIN MANAGEMENT

Exploring different angles

FPM Spring Meeting
October 18-20, 2019
The Byron at Byron,
Byron Bay, NSW

REGISTRATION FORM

INVOICE/TAX INVOICE ABN: 82 055 042 852

PERSONAL DETAILS

First name Surname

Postal address

City/suburb State Postcode

Email

Telephone Dietary requirements

☐ vegetarian ☐ gluten free ☐ dairy free ☐ seafood allergy ☐ nut allergy ☐ halal ☐ vegan

Please provide your name details as they should appear on the name badge

Preferred name (Title, first name, surname)

Privacy: I consent to my name and state/country being included on the delegate list to be circulated at the meeting:

Signature

REGISTRATION FEES

All fees are quoted in Australian dollars and are inclusive of GST.

Registration fee includes meeting registration, conference lunch and teas, welcome reception and meeting dinner.

- ☐ **Early-bird full registration** (until August 1) \$990 ☐ **Early-bird trainee/allied health/retired fellow** (until August 1) \$759
☐ **Full registration** (from August 2) \$1089 ☐ **Full trainee/allied health/retired fellow** (from August 2) \$836

ONE-DAY REGISTRATION

Includes meeting registration, teas and lunch for selected single day. Friday day registration includes welcome reception.

- ☐ **One day registration** \$605 ☐ **Trainee/allied health/retired Fellow one day registration** \$440
☐ Friday October 18, 2019 ☐ Saturday October 19, 2019 ☐ Sunday October 20, 2019

WORKSHOPS

All fees are quoted in Australian dollars inclusive of GST. All workshops will take place at The Byron at Byron, on Friday October 18 from 8am- 12.30pm. Please indicate your attendance.

- ☐ **W01A:** Pain management sonography, Joints and neural innervation (shoulder, hip, and knee) 8-8.45am \$132 (FULL)
☐ **W01B:** Pain management sonography, Cervical spine 9-9.45am \$132 (FULL)
☐ **W01C:** Pain management sonography, Thoracic spine 10.30-11.15am \$132 (FULL)
☐ **W01D:** Pain management sonography, Lumbosacral spine 11.30am-12.15pm \$132 (FULL)
☐ **W02A:** Acute Severe Behavioural Disturbance Education Session, 8-10am \$44
☐ **W02B:** Acute Severe Behavioural Disturbance Education Session, 10.30am-12.30pm \$44
☐ **W03A:** Coeliac plexus blocks for pancreatic cancer, 8-9am \$44
☐ **W04A:** Acute pain management for cancer related pain, 9.15-10.15am \$44
☐ **W05A:** Paediatric procedures, 10.15-11.15am \$44
☐ **W06A:** Developing a MD and interventional hospital cancer pain service, 11.30am-12.30pm \$44

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REGISTRATION FORM (CONTINUED)

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SOCIAL FUNCTIONS

All fees are quoted in Australian dollars and are inclusive of GST. Please indicate your attendance.

Welcome reception, Friday October 18, 5.15-6.45pm. (Complimentary for delegates with full registration and Friday day registration).

☐ I will be attending the welcome reception **(yes/no)**

☐ I require _____ additional adult ticket/s at \$77 each

Meeting dinner, Saturday October 19, 7-10.30pm. (Complimentary for delegates with full registration).

☐ I will be attending the meeting dinner **(yes/no)**

☐ I require _____ additional adult ticket/s at \$165 each

☐ I require _____ additional child ticket/s at \$55 each (under 12)

PAYMENT

Conference registration cannot be confirmed until payment is received.

Cheques payable to "ANZCA" in Australian dollars or complete credit card details below.

Registration fee: \$ _____ Social function fees: \$ _____ Workshop fees: \$ _____

Total payment: \$ _____

☐ Visa Card ☐ Master Card

Card number _____

Expiry date _____

Signature _____

Card holders name (as it appears on the card) _____

Please return registration form and payment to:

Eleni Koronakos, FPM ANZCA

t 61 3 8517 5308

f 61 3 9510 6786

e fpm@anzca.edu.au

630 St Kilda Rd, Melbourne VIC 3004