2008 ANNUAL CONFERENCE

Friday 27 June 2008

ACIVC
Australian Council of Independent Vocational Colleges Limited

Registration Form

Organisation Details

Organisation Name: .....

Address: .....

..... State: ..... Postcode: .....

Contact Name: ..... Email: .....

Telephone No:..... Fax No: .....

Attendees

Name	**Cost**
.....	$_____
.....	$_____
.....	$_____
.....	$_____
.....	$_____
.....	$_____
.....	$_____

Cost per Person

Members	$195 ea
Non Members	$250 ea
3rd or more from same organisation	$180 ea

Sub-Total	**$**_____
GST (10%)	$_____
Total	**$**_____

Payment Details

❑ Direct Debit ❑ Cheque

Bank: National Australia Bank

BSB: 082 231

Account: 52524 3953

Invoice Address: .....

.....

.....

Registration Form and Payment must be received by 20 June 2008
Fax to: 02 8021 0843

Suite 244, 813 Pacific Highway
CHATSWOOD NSW 2067

Phone: (02) 8021 0842
Fax: (02) 8021 0843