

Registration Form & Tax Invoice

Australian Publishers Association ABN: 81 003 985 313. This is your tax invoice.
Please retain a copy of this completed form or forward to your accounts department.

Fax your completed form to 02 9281 1073 or email it to dee.read@publishers.asn.au
You will receive a confirmation email when your registration has been processed.



Please print clearly and fill in all fields.
Fill in a second form if more than 3 participants.

Name of Event

Date of Event..... City

Company

Name of Participant 1..... Current Position

Email Tel

Special dietary or physical access requirements (please specify)

Name of Participant 2..... Current Position

Email Tel

Special dietary or physical access requirements (please specify)

Name of Participant 3..... Current Position

Email Tel

Special dietary or physical access requirements (please specify)

Payment Details

All payments must clear one week prior to workshop date. Credit card payments are preferred.

(Please tick) I have read and understood the cancellation and refund policy as found on the Training page of the APA website at www.publishers.asn.au

Member Non member Other, please state:

Cost (GST inclusive) Payment by: Credit card Cheque EFT

Credit Card

Amex Mastercard Visa Diners

Card number/...../..... Expiry

Name as it appears on cardSignature

Name & Email address for Tax Receipt

Electronic Funds Transfer (EFT)

If you are paying by EFT, please fax a remittance advice along with this registration form to the APA on 02 9281 1073.

Account Name: Australian Publishers Association Ltd

National Australia Bank BSB: 082 001 Account no: 509 150 554

Cheque

Post a copy of this completed form with your payment to Dee Read, APA, 60/89 Jones St Ultimo NSW 2007.

Please make cheques payable to Australian Publishers Association.

FOR OFFICE USE ONLY

Account: -

Course ID:

Email conf

Job: 4-1310

Date Reg. Entered:

Payment Processed