

SMIGGINS SKI CONFERENCE

Smiggins Hotel, Smiggins Holes NSW 8 - 14 August 2010



REGISTRATION FORM

Title First Name Surname

(Prof/Dr/Mr/Mrs/Miss/Ms)

Mailing Address

Practice/Institution/Home

Number/Street/Road

Suburb/Town/City State P/Code

Telephone Work Area Code Number **Home** Area Code Number

E-Mail **Fax** Area Code Number

Accompanying Person

PAYMENT DETAILS 1

All registration fees include 10% GST

Enter Amount

<input type="checkbox"/> SMA Full Member Registration	\$190	<input type="text"/>
<input type="checkbox"/> Full Registration (Non-Member)	\$385	<input type="text"/>
<input type="checkbox"/> Accompanying Persons	\$60	<input type="text"/>

PAYMENT DETAILS 2

RACGP QA-CE Number if applicable or D.O.B.

Tick appropriate boxes for verification of enclosed payment

Cheque Money Order Credit Card

Circle Credit Card Type
Bankcard / Mastercard / Visa

- - -

Full name on Credit Card :

Expiry Date **Signature**

Registration Fee (member)	\$	<input type="text"/>
Registration (non-member)	\$	<input type="text"/>
Accompanying Person	\$	<input type="text"/>
Grand Total =	\$	<input type="text"/>

Please make cheques payable to SMA (Qld Branch)

Mailing Address:
SMA QLD 2.04
Sports House, 150 Caxton St, MILTON Q 4064
Ph: 07 3367 2700 Fax: 07 3367 2800

ACCOMMODATION DETAILS

For accommodation bookings please contact Belinda or Claudia directly at Smiggins Hotel.

Smiggins Hotel
PO Box 28, Perisher Valley NSW 2630

Ph: 02-6457 5375
Fax: 02-6457 5475

REFUND POLICY : All cancellations must be notified in writing (by mail or facsimile) to the State Office.
Sports Medicine Australia ABN 95 010 196 871 Once paid this form becomes a tax invoice.

A 50% refund will be provided for all cancellations after 16th July 2010. No refund will be provided after 4th August 2010.

Conference Paper Title: