

**TAX INVOICE**  
 ABN 68 008 784 585

28 - 29 November 2009 Monash University Law Chambers, Melbourne (Victoria)

**DOCTORAL COLLOQUIUM REGISTRATION FORM**

Website: [www.anzmac2009.org](http://www.anzmac2009.org)

**Delegate Information** [Please print clearly in BLOCK letters]

Mr/Mrs/Ms/Dr/Prof First name: .....

Family name: .....

Position: .....

Department/Campus: .....

Organisation: .....

Postal address: .....

City: ..... State: .....

Country: ..... P/Code .....

Tel (Bus): ..... Mob: .....

Fax (Bus): .....

This my first ANZMAC Doctoral Colloquium. YES / NO

Email: .....

Special needs [dietary/disabled etc] .....

.....

**NOTE:** To be eligible to register for the Doctoral Colloquium, delegates must have submitted an application form and research proposal by Friday 10 September 2009 as advised at the above website. Accepted students will have been advised.

**Please confirm:**

- YES, I have submitted the application form and research proposal.
- YES, I have been formally advised of my acceptance to the DC Workshop.

I have registered for the main ANZMAC 2009 Conference. YES / NO

**Doctoral Colloquium Fee** [Fees in AUD inclusive of GST]

**A\$165** inc GST to be paid by Friday 16 October 2009.

Includes: Doctoral Colloquium and all catering during the program, including the Welcome Reception Barbeque and Saturday Dinner.

However, delegates must indicate (tick) if attending functions to ensure a ticket is made available.

**Friday 27 November 2009**

- Writing Skills Workshop (PM)  
Caulfield Campus, Monash University
- Welcome Reception and Barbeque  
Caulfield Campus, Monash University

**Saturday 28 November 2009**

- Workshop Dinner  
Council House 2 Restaurant  
240 Little Collins Street

**Accommodation** [Bookings must be made by Friday 30 October]

DC Workshop delegates who are not attending the main ANZMAC 2009 Conference can make their accommodation bookings for the Workshop period using the main conference registration form.

ALL bookings will require a deposit of one night's tariff and a credit card number.

More details about each accommodation venue offered, the registration form and a map showing locations can be found at [www.anzmac2009.org](http://www.anzmac2009.org).

**Fax completed form to +61 8 9332 2911 OR  
 Email to [promaco@promaco.com.au](mailto:promaco@promaco.com.au)**

**Payment Details**

WORKSHOP REGISTRATION FEE [includes GST] ....	<b>COST</b> .....	<b>OFFICE</b> .....
<b>TOTAL*</b> [will be plus 3% bank fee if applicable] .....	.....	.....

**CONFERENCE SECRETARIAT:**

PROMACO CONVENTIONS PTY LTD ABN 68 008 784 585  
 PO Box 890, Canning Bridge WESTERN AUSTRALIA 6153  
 Tel: +61 8 9332 2900 Fax: +61 8 9332 2911  
 Email: [promaco@promaco.com.au](mailto:promaco@promaco.com.au)

**PLEASE NOTE:** The Registration Form is recognised by the Australian Taxation Office as a compliant TAX INVOICE and you should keep a copy of your completed form. Once payment has been processed, a receipt and confirmation letter will be sent to the person named in the delegate information section. The tax invoice/ form and receipt is required by the ATO to reclaim the GST and should be passed to the appropriate person in your organisation. Reprints for tax invoice/forms and receipts, will be subject to a A\$22 administration fee.

**PAYMENT BY EFT:**

**ACCOUNT NAME:** Promaco Conventions Pty Ltd  
**BSB:** 306 107 **ACCOUNT NO.** 521 958 7  
**BANK:** Bankwest **BRANCH:** Adelaide Terrace, Perth  
**REFERENCE:** ANZMAC DC 09 and YOUR Last name / First name.  
 Please **Email** or **Fax** confirmation to Promaco on the day of transaction.

**PAYMENT BY CHEQUE:**

Please make **CHEQUE** in AUSTRALIAN DOLLARS  
**Payable to:** Promaco Conventions Pty Ltd

**PAYMENT BY CREDIT CARD\*** MASTERCARD / VISA / AMEX  
 [\*A 3% Bank Fee will be charged on the total amount paid by credit card]

Cardholder (print) .....

Expiry date ..... Signature: .....