# Registration

COMPOST

The way to grow!

Please complete one form for each delegate

## DELEGATE DETAILS

Last Name: _____ Title: ____ First Name: _____

Organisation: _____ Position: _____

Mailing Address: _____

City: _____ State: _____ Postcode: _____

Phone: (____)_____ Fax: (____)_____ Mobile: _____

Email: _____

Dietary Requirements (specify): _____

If you are a person with a disability and require special equipment or services, please attach a written description of your needs.

## CONFERENCE REGISTRATION all amounts include GST

### 1. PLEASE SELECT WHICH CONFERENCE YOU ARE ATTENDING:

- ◯ Sydney (21 & 22 February 2005)
- ◯ Adelaide (28 Feb & 1 Mar 2005)
- ◯ Brisbane (7 & 8 March 2005)
- ◯ Melbourne (24 & 25 February 2005)
- ◯ Perth (3 & 4 March 2005)

### 2. PLEASE SELECT YOUR REGISTRATION PACKAGE:

**◯ PACKAGE 1**

1 x Full Registration *(includes attendance at all sessions, conference proceedings and morning/afternoon tea & lunch (both days)*

1 x Conference Dinner Ticket

Cost: $450 (incl GST)

**◯ PACKAGE 2**

1 x Full Registration *(includes attendance at all sessions, conference proceedings and morning/afternoon tea & lunch (both days)*

Cost: $360 (incl GST)

**◯ PACKAGE 3**

1 x Day Registration *(includes attendance at sessions on one day, conference proceedings and morning/afternoon tea & lunch*

Please circle which day
*Day 1* *Day 2*

Cost: $210 (incl GST)

**◯ PACKAGE 4**

Additional Conference Dinner Ticket

Cost: $90 (incl GST)

## PAYMENT DETAILS ABN: 71 836 963 435

Please note: forms cannot be processed without payment. Upon receipt of your cheque, credit card details or official purchase order, a tax invoice will be issued.

**TOTAL:** $_____

☐ Cheque attached (please make cheques payable to WMAA - Compost Roadmap)

☐ Official Purchase Order #: _____

☐ Credit Card ◯ Mastercard ◯ Visa ◯ Bankcard

Card #: ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ Expiry Date: ☐☐/☐☐

Cardholder Name: _____ Signature: _____

## PLEASE FAX OR POST YOUR COMPLETED REGISTRATION FORM TO:

**COMPOST - The Way to Grow!**
PO Box 994 ROCKDALE NSW 2216
Fax: (02) 9599 6032
Enquiries: Veronica Dullens, WMAA - Ph: 1300 651 026, Email: veronica@wmaa.asn.au