

Effective Teaching & Learning for Health Professionals conference '08

NTGPE



Registration Form – This is also your Tax Invoice (ABN 28 099 735 627)

Title	Surname	Given Name
Practice/ Organisation		Profession
Postal Address		
City	State	Postcode
Telephone: (Bus)		(Fax)
Email		
RACGP or ACRRM QA&CPD No.		
Name of Additional Attendee for Name Badge and catering		
Do you have special dietary requirements? Yes No (Please Circle). If Yes, please specify:		
Will you be attending the conference dinner? Yes No (Please Circle)		
Will you require an additional conference dinner ticket? Yes No (Please Circle)		

Please Tick ☒ the Items you would like to include in your registraton package

Early Bird Registration (Before 1 st August)	<input type="checkbox"/> \$165	Payment by Direct Deposit: Please Deposit into NTGPE Account BSB #: 035 306 Account #: 230 343 Please record your first and last name as the reference and record the transaction receipt # given by the bank here: _____ This will assist in tracking your payment.
Regular Registration (After 1 st August)	<input type="checkbox"/> \$220	
NTGPE Accredited Trainer Registration, Travel & Accom	<input type="checkbox"/> \$0	
Additional Conference Dinner Ticket	<input type="checkbox"/> \$100	Payment By Cheque: Please make payable to "Northern Territory General Practice Education Ltd" and mail to : Teaching and Learning Conference, C- NTGPE, PO Box u179, Charles Darwin University NT 0815.
Total	\$	

Credit Card Payment: Please Charge \$_____ to my credit card.

Credit Card Number ____/____/____/____ Expiry Date __/ __

Cardholder's Name
(as it appears on Credit Card) _____

Cardholders Signature: _____

Please return this form to NTGPE via Fax (08) 8946 7077, email: kim.pemberton@ntgpe.org or post to: PO Box U179, Charles Darwin University, NT 0815

www.ntgpe.org

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Accommodation

To obtain group discount rates, all accommodation must be booked through NTGPE. We require Credit card details to secure your booking. Your card details will be forwarded to the hotel and may be debited for the first nights fee. In the event of a cancellation or of 'no show', the deposit will not be refunded. Insurance is recommended. You will be required to pay the full amount on check out.

NTGPE are not able to guarantee rooms without credit card details.

Please rank the two options offered with a 1 and 2 to demonstrate your 1st and 2nd preferences of the accommodation available.

Pref	Hotel	Date In	Date out
	Darwin Airport Resort @ \$210/night		
	The Lumu Luma Apartments @ \$120/night		

We require a credit card to secure your booking. Your credit card details will be forwarded to the hotel and may be debited for the first nights fee. In the event of a cancellation or 'no-show' a fee will apply. Insurance is recommended. Please make yourself aware of the hotels cancellation policy.

☐ Mastercard Card Number: _____/_____/_____/_____

☐ VISA Card Number: _____/_____/_____/_____

☐ AMEX Card Number: _____/_____/_____/_____

Expiry Date _____/_____ Card Holder Name: _____

Card Holder Signature: _____

Please Note: You are strongly encouraged to register and book accommodation and travel early. Hotels will not hold allocations at conference rates less than 30 days out from the conference and airfares will rise noticeably within 30 days of the conference. There are several other conferences on in Darwin during the same week – **Please do not underestimate the importance of early bookings.**

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