2011 Queensland Epilepsy Symposia
Registration Form

Venue: Griffith University South Bank Campus – Ian Hanger Recital Hall (Conservatorium)

Spaces Limited – Register Now!

Please print or type and complete all relevant sections. A separate form is required for each person attending.

Title: _____ First Name: _____ Surname: _____

Position (if applicable): _____ Organisation: _____

Postal Address: _____

Suburb: _____ Postcode: _____

Email address: _____ Mobile: _____ Telephone: _____

Optional information:

☐ Person living with epilepsy ☐ Parent or Family Member ☐ Disability/Community worker ☐ Medical Service Provider

Special requirements: _____

Membership:

I am a current individual member of Epilepsy Queensland ☐ Yes ☐ No

I am a current member of another Epilepsy Australia organisation ☐ Yes ☐ No

Provide details of Epilepsy Australia membership: ☐ Vic ☐ SA &NT ☐ Tas ☐ ACT ☐ WA (to verify)

☐ I would like to become an individual member of Epilepsy Queensland to enjoy the benefits of discounted registration.

EARLY BIRD REGISTRATION (before 30 September 2011)	**Wednesday 2 November 9:00am – 1:00pm Controversies in Epilepsy**	**Friday 4 November 1:00pm – 5:00pm Future of Epilepsy**	**Wednesday & Friday (both)**
Epilepsy Queensland (EQI) individual member FREE if booked before 30 Sept	☐ EQI individual member FREE if booked before 30 Sept	☐ EQI individual member FREE if booked before 30 Sept	☐ EQI individual member FREE if booked before 30 Sept
Non-member If booked before 30 Sept	☐ $40 If booked before 30 Sept	☐ $40 If booked before 30 Sept	☐ $50 to attend both sessions If booked before 30 Sept
FULL REGISTRATION			
EQI individual member	☐ $20 If booked after 30 Sept	☐ $20 If booked after 30 Sept	☐ $30 If booked after 30 Sept
Non-member	☐ $60 If booked after 30 Sept	☐ $60 If booked after 30 Sept	☐ $80 If booked after 30 Sept

METHOD OF PAYMENT: Tax invoice ABN: 42 025 269 961

No cancellation refunds after 2/10/11

I enclose a cheque/money order made payable to Epilepsy Queensland for the amount of $ _____ (incl GST) for payment of my Symposia Registration and Membership fee of $27.50 (if applicable).

OR

Please charge my ☐ MasterCard ☐ Visa $ _____ (incl GST)

Card Number: ☐☐☐☐-☐☐☐☐-☐☐☐☐-☐☐☐☐ Expiry Date: ☐☐-☐☐☐☐

Cardholder's Name: _____ Cardholder's Signature: _____

Yes I'm happy to receive mail from:

☐ Epilepsy Queensland ☐ Griffith University and ☐ St Vincent's Hospital Brisbane.

See Privacy Policies on www.epilepsyqueensland.com.au

REPLY TO
Email:rsvp@epilepsyqueensland.com.au
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2011 Queensland Epilepsy Symposia Partners

epilepsy queensland inc. Griffith UNIVERSITY epilepsy AUSTRALIA St Vincent's Brisbane