



Australian Property Institute

REGISTRATION FORM

Please print clearly and return completed form with payment to:
API (WA) 2009 State Conference
PO Box 502, SOUTH PERTH WA 6951
Or fax: (08) 9474 1157 (Intl fax +61 8 9474 1157)
Or email: admin@propertyinstitute-wa.com

DELEGATE INFORMATION

Title:

Family Name:

First Name:

Organisation:

Name as you wish it to appear on your name badge:

Postal Address:

Suburb: State: PostCode:

Telephone:

Email:

Mobile:

Special requirements (dietary or otherwise):

Privacy Statement: In registering for this event, relevant details may be incorporated into a delegate list for the benefit of all delegates, sponsors, and exhibitors, the Australian Property Institute and other parties directly related to the 2009 State Conference. NB: If you do not wish to have your name and contact details provided to the above mentioned parties or for further promotion, please tick here.....

CONFERENCE REGISTRATION (All fees include 10% GST and are shown in Australian dollars.)		Early Bird (closes 10th July 2009)	Standard (11th July 2009 onwards)	Payment
SECTION "A"	FULL REGISTRATION			
All Conference sessions Morning Tea Luncheon session Cocktail Party	API Member	\$295	\$395	\$
	Non Member	\$355	\$455	\$
Please confirm your intention to attend the following:	Luncheon	YES/NO		NIL
	Cocktail Party	YES/NO		
SECTION "A" SUBTOTAL				\$
SECTION "B"	SESSIONAL REGISTRATION			
Morning Session – includes all presentations prior to luncheon	API Member	\$125	\$150	\$
	Non Member	\$150	\$175	\$
Afternoon Session – includes all presentations after luncheon	API Member	\$125	\$150	\$
	Non Member	\$150	\$175	\$
LUNCHEON	API Member	\$95		\$
	Non Member	\$115		\$
SECTION "B" SUBTOTAL				\$
TOTAL PAYABLE				\$
SECTION "C" - PAYMENT DETAILS				
Payment by Credit Card				
Please charge \$..... to my Mastercard/Visa (Sorry we do not accept Diners or Amex)				
Card No:..... Expiry Date:...../.....				
Cardholder's Name:				
Signature:				
Payment by Cheque				
Please make cheques payable to: Australian Property Institute				
Payment by Direct Deposit				
Commonwealth Bank – BSB 066-130 Account Number 0110467				
Remittance Advice <u>must</u> accompany registration form.				
I understand and accept the conditions of the cancellation policy (See General Information)				
Signature..... Date.....				
This document will be a Tax Invoice/Receipt for GST when you make payment (Issuing of a separate invoice/receipt will incur a \$15 administration fee). All prices are GST inclusive—ABN 49 007 505 866				