

Event registration form and tax invoice*

State of the State address | Hon Anna Bligh MP, Premier of Queensland
Wednesday, 14 September 2011, Brisbane Convention and Exhibition Centre

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| To register | Registrations close 5pm, 7 September 2011 (unless sold out prior). Fax 3041 6575 Email daniella.reitano@ceda.com.au Post GPO Box 2900, Brisbane 4001 • Confirmation of registration will be given <u>one week before the event</u> . Please contact us after that time if your registration has not been confirmed. | |
| Enquiries Registration options | Please phone Daniella Reitano on 07 3229 9955 | |
| | CEDA members and guests <input type="checkbox"/> \$140 + \$14 GST = \$154.00 per person <input type="checkbox"/> \$1310 + \$131 GST = \$1441.00 table x 10 | Non Members <input type="checkbox"/> \$170 + \$17 GST = \$187.00 per person <input type="checkbox"/> \$1610 + \$161 GST = \$1771.00 per table x 10 |
| | Full payment is required before the event. <input type="checkbox"/> Cheque I enclose a cheque made payable to CEDA for \$ _____ | |
| | <input type="checkbox"/> EFT Please email daniella.reitano@ceda.com.au with remittance advice quoting reference Q110914 Account name: Committee for Economic Development of Australia Bank: NAB, 330 Collins Street, Melbourne 3000 BSB: 083 004 Account No: 515113346 | |
| | <input type="checkbox"/> Credit card <input type="checkbox"/> MasterCard <input type="checkbox"/> Visa <input type="checkbox"/> Amex <input type="checkbox"/> Diners Club Credit card number _____ Expiry date _____ Amount \$ _____ Name on Card _____ | |
| | CEDA ABN 49 008 600 922 *This form becomes a tax invoice/receipt when you make payment. A separate tax invoice will not be issued. | |
| Confirmation | <ul style="list-style-type: none">• Please provide an email address below in order for us to forward written confirmation of your registration, which will be sent approximately one week before the event.• Please contact us if you do not receive confirmation.• If registrations are closed you will be contacted immediately. | |
| Registration details | Mr / Ms / Mrs _____ First name _____ Last name _____ Position _____ Company _____ Phone _____ Email _____ Dietary requirements _____ | |
| | Mr / Ms / Mrs _____ First name _____ Last name _____ Position _____ Company _____ Phone _____ Email _____ Dietary requirements _____ Please photocopy this form if you are registering more than two delegates. | |
| Corporate tables | <ul style="list-style-type: none">• Please supply contact details of the organiser of the corporate table on your registration form. A confirmation email will be sent, and your complete list of guest details will be required at one week before the event. | |
| Cancellation policy | <ul style="list-style-type: none">• Cancellations received by 5.00pm, 7 September 2011 will be refunded in full.• Full payment is required for any cancellation received after this date or for non-attendance on the day.• Substitutions may be three days prior to the event.• All cancellations and changes must be forwarded in writing (by email or fax). | |
| Privacy | <ul style="list-style-type: none">• CEDA collects this information to conduct our business, and it will not be passed to other organisations.• Photography and audio recording may take place at CEDA events and may be reproduced in CEDA publications or on our website. | |