



PAYMENT DETAILS

Payment Summary

Registration fee \$ _____

Subtotal \$ _____

Amex Surcharge – 1.4% of subtotal (if applicable) \$ _____

Total \$ _____

PAYMENT METHOD

- Please invoice
- Cheque attached payable to ACOSS
- Direct Debit – BSB 062-033 Account Number: 901648 Ref: [Organisation name]

Please debit the following credit card (alternatively register online)

MasterCard Visa American Express (plus 1.4% surcharge)

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Expiry Date

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 CVV

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Name on Card (please print) _____

Signature _____

Please return this booking form to ACOSS:
Mail: Locked Bag 4777, Strawberry Hills, NSW, 2012
Fax: 02 9310 4822
Email: conference@acoss.org.au

Enquiries please email Al Parmeter (conference@acoss.org.au) or phone ACOSS on 02 9310 6200

CANCELLATION & REFUNDS

Cancellations of registration received in writing by 13th March 2009 will be accepted and registration fee refunded less a \$55 administration fee. No refunds will be granted after 13 March 2010. Substitute participants welcome at no additional charge.