



REGISTRATION FORM

AUSTRALASIAN DERMATOPATHOLOGY SOCIETY 30TH ANNUAL CONFERENCE

21ST - 23RD AUGUST 2009 ~ HERITAGE AUCKLAND

FOR ONLINE REGISTRATIONS www.spconferences.co.nz/ads.html

Title [Prof/Dr/Mr/Mrs/Ms/Miss] First Name.....Family Name.....

Institution/Organisation.....

Position Held.....

Contact Address.....City.....

State.....Postcode.....Country.....

Phone.....Fax.....

Email Address.....

Please note any special requirements regarding health, diet, mobility etc.....

I do not wish my personal details to be included in the Participant List.

ALL FEES LISTED ARE IN NZ \$

SECTION A - REGISTRATION FEES

| | Earlybird on or before 17/7/09 | Full fee after 17/7/09 |
|---------------------------------------|------------------------------------|------------------------------------|
| ADS Member - Pathologist | <input type="checkbox"/> \$1000.00 | <input type="checkbox"/> \$1200.00 |
| ADS Member - Dermatologist | <input type="checkbox"/> \$1000.00 | <input type="checkbox"/> \$1200.00 |
| Non Member - Pathologist | <input type="checkbox"/> \$1200.00 | <input type="checkbox"/> \$1300.00 |
| Non Member - Dermatologist | <input type="checkbox"/> \$1200.00 | <input type="checkbox"/> \$1300.00 |
| Trainee - Pathologist | <input type="checkbox"/> \$450.00 | <input type="checkbox"/> \$500.00 |
| Trainee - Dermatologist | <input type="checkbox"/> \$450.00 | <input type="checkbox"/> \$500.00 |
| Friday Registration - Pathologist | <input type="checkbox"/> \$500.00 | <input type="checkbox"/> \$500.00 |
| Friday Registration - Dermatologist | <input type="checkbox"/> \$500.00 | <input type="checkbox"/> \$500.00 |
| Saturday Registration - Pathologist | <input type="checkbox"/> \$500.00 | <input type="checkbox"/> \$500.00 |
| Saturday Registration - Dermatologist | <input type="checkbox"/> \$500.00 | <input type="checkbox"/> \$500.00 |
| Sunday Registration - Pathologist | <input type="checkbox"/> \$350.00 | <input type="checkbox"/> \$350.00 |
| Sunday Registration - Dermatologist | <input type="checkbox"/> \$350.00 | <input type="checkbox"/> \$350.00 |

Trainees please indicate training program and name of institution.....

SECTION B - SOCIAL PROGRAM

Catering cannot be guaranteed unless you complete this section.

Welcome Reception - Friday 21st August, Heritage Auckland (included in full registration)

Yes I will be attending No I will not be attending

I require.....extra tickets at NZ\$70.00 each \$.....

Conference Dinner - Saturday 22nd August, Grand Tearoom, Heritage Auckland (included in full registration)

Yes I will be attending No I will not be attending

I require.....extra tickets at NZ\$120.00 each \$.....

Section B Total \$.....

SECTION C - ACCOMMODATION

Please include the equivalent of one nights accommodation and this will be forwarded to the hotel on your behalf. Delegates are to finalise their own accounts on departure. For other accommodation choices please visit www.auckland.nz.com/accommodation.aspx to make your own booking.

Please tick preferred Heritage Hotel Heritage Hotel - Tower Block
 Superior \$170 Deluxe Suite \$185 One bedroom Executive Suite \$200

Type of room.....Sharing with.....

Arrival Time.....

Date of ArrivalDate of Departure.....

Special Requirements.....

REMITTANCE

GST No 91-425-246

Section A - Registration \$

Section B - Social Program \$

Section C - Accommodation \$

Total \$.....

I enclose cheque payable to SP Conference Management Trust A/C

Credit Card - please indicate

Visa Mastercard Diners Club American Express

Credit Card Number

Card Verification Number

Expiry Date.....

Amount to Charge \$.....

Cardholders Name

Cardholders Signature.....

- Important Notes:
- This form will be a tax invoice for GST purposes when you make a payment.
 - Please retain the original copy for your records.
 - Payment online with your credit card will appear on your statement as a transaction with SP Conference Management.

TRIBUTE

I would like to deliver a 2-3 minute tribute to Dr Ackerman.

Please return this registration form to:-

SP Conference Management

PO Box 4400

Palmerston North 4442

New Zealand

Tel: +64 6 3571466

Fax: +64 6 3571426

Email: suepeck@xtra.co.nz

www.spconferences.co.nz/ads.html