



Supporting the Health Professions - The Next Wave of Workers

26 November 2008 (Wednesday)
8:30am – 4:30pm



Industry Skills Council
Community Services & Health
Industry Skills Council

The Sebel, Albert Park - Melbourne VIC

HEALTH PROFESSIONS SUPPORT FORUM REGISTRATION FORM

Please complete one registration form per delegate

Name		
Position		
Organisation		
Postal Address		
State	Post Code	Fax
Telephone	Dietary Requirements	
Email		

Payment details – Please tick and complete

<input type="checkbox"/>	Please register me at the price of \$395.00 (inc.GST)
<input type="checkbox"/>	I have enclosed a cheque payable to Community Services and Health Industry Skills Council Ltd
<input type="checkbox"/>	I am faxing the order form to you and wish to be invoiced for the ticket(s). I have attached my company's PURCHASE ORDER FORM (<i>NB Invoiced orders will not be accepted without a company Purchase Order</i>)

CREDIT CARD DETAILS

<input type="checkbox"/>	I wish to pay by credit card and hereby authorise the CS&H Industry Skills Council to charge the amount of \$395.00
--------------------------	--

Name on the Card

Expiry Date	Type of Card	<input type="checkbox"/> Visa	<input type="checkbox"/> MasterCard
Credit Card No.			
Organisation Type	Representing	Industry Specialisation and Areas	
<input type="checkbox"/> RTO (public)	<input type="checkbox"/> Government Employer (GEMP)	<input type="checkbox"/> Community Services	
<input type="checkbox"/> RTO (private)	<input type="checkbox"/> Private Employer (PEMP)	<input type="checkbox"/> Health	
<input type="checkbox"/> Group Training Co	<input type="checkbox"/> Union		
<input type="checkbox"/> Employer	<input type="checkbox"/> Peak Body / Association		
<input type="checkbox"/> School	<input type="checkbox"/> Non-Government Association		
<input type="checkbox"/> NAC			

Signature _____ Date _____

How did you find out about the forum?

Email Web Newsletter Other _____

Please tick this box if you **do not** wish us to supply your contact details to the sponsors and exhibitors of this conference

For more information: Linda Coggiola: 02 9270 6628 or Lisa Woodward: 02 9270 6626

**Please complete and return to: Fax 02 9270 6601
or CS&H Industry Skills Council PO Box 49, Strawberry Hills NSW 2012**

Please note: Cancellation before the event date will result in 50% loss of registration fee.

Non-attendance on the day will result in 100% loss of registration fee.

www.cshisc.com.au ABN 96 056 479 504