

The Thirteenth Annual Scientific Meeting
of the
Australasian CMC Alumni Association



HOBART, TASMANIA
21 - 22 OCTOBER 2017
REGISTRATION FORM

All alumni and alumni spouses are requested to register individually as delegates. One form per family.

NAME:			
SPOUSE:			
CHILDREN	1	2	3
ADDRESS			
PHONE:	M:	H:	W:
EMAIL:			

REGISTRATION FEES:	
Category	Rate
A. Doctors eligible to claim CME points and tax benefits	\$ 400.00
B. Doctors not eligible to claim CME points and tax benefits	\$ 300.00
C. Non-medical Alumni (Nurses & Allied Health)	\$ 250.00
D. Fully Retired Alumni (Medical and non-medical)	\$ 200.00
E. Spouses – Non-alumni	\$ 150.00
F. Accompanying child (5 – 15 years)	\$ 100.00
G. Accompanying child (Under 5 years)	Free

No.	Name	Category	Amount
1			\$
2			\$
3			\$
4			\$
5			\$
TOTAL			\$

PAYMENT

1. Direct Transfer (Australian Dollars only)	Transfer to: Account Name: CMC Alumni Association BSB: 062 800 Account No. 1002 7978 Bank: Commonwealth Bank of Australia Branch: Hamilton, NSW	Remittance Details: Transaction No. Date of transfer:/...../2016
2. Cheque / Bank Draft (Australian Dollars only)	Cheques / Drafts to be made payable to: "CMC Alumni Association"	Cheque / Draft No. Date of Cheque / Draft/...../2016 Drawee Bank

- All alumni and alumni spouses are requested to register individually as delegates for the meeting.
- Accompanying person category applies to children only.
- Please use ONE form per family.

Please Return the Registration Form with Cheque / Draft / Transfer details to:
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