

# Booking Form

## Corporate Aboriginal Diversity and Engagement

Friday 29 March 2019  
8:30am ~ 5:00pm  
Registration ~ 8:00am sharp  
Cost \$280 per person

Email this booking form to:

**Indigenous Services Australia Pty Ltd**  
PO Box 2043  
COMO WA 6152  
email: admin@indigenousservices.com.au

Carol Wallbank: 0408 201 610  
Tony Shaw: 0417 918 488

## Contact details

Contact name:	Telephone:
Job title:	Email:
Company name:	Company address:
ABN:	

## Delegate details

1 Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/>	6 Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/>
2 Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/>	7 Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/>
3 Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/>	8 Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/>
4 Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/>	9 Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/>
5 Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/>	10 Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/>

## RSVP by Friday 22 March 2019

### Payment details

 Credit card or EFT ~ payment is required at time of booking

Total number of delegates at \$280 each ..... total of \$.....

**EFT Indigenous Services Australia**  
BSB: 086 006 Account: 83 192 8053

EFT Ref: FEEL [insert your company name]

## Credit Card

Card number:.....	
Visa <input type="checkbox"/> Mastercard <input type="checkbox"/>	Expiry date:..... Amount: \$.....
Name on card:.....	Signature:.....

## Conditions

**Cancellations:** Substitute delegate welcome at no additional charge.  
No refund for cancellations within 14 days of the event, 50% refund for cancellations at other times.

