

# TEACHING AND MENTORING

PRactical SKILLS FOR JUNIOR DOCTORS

## ATTENDEE DETAILS

Name: Dr / Mr / Ms / Mrs / Miss \_\_\_\_\_

AMA Queensland Member     Non-member

Registration category:  Student     Intern     Doctor in Training (yr 2-5)     Senior Doctor

Practice/Hospital/Company name: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email: \_\_\_\_\_

Address: \_\_\_\_\_

Dietary requirements: \_\_\_\_\_ Attendance:  in-person     via webinar

## ADDITIONAL ATTENDEE

Name: Dr / Mr / Ms / Mrs / Miss \_\_\_\_\_

Name: Dr / Mr / Ms / Mrs / Miss \_\_\_\_\_

AMA Queensland Member     Non-member

Registration category:  Student     Intern

Doctor in Training (yr 2-5)     Senior Doctor

Practice/Hospital/Company name: \_\_\_\_\_

Email: \_\_\_\_\_

Dietary requirements: \_\_\_\_\_

Attendance:  in-person     via webinar

AMA Queensland Member     Non-member

Registration category:  Student     Intern

Doctor in Training (yr 2-5)     Senior Doctor

Practice/Hospital/Company name: \_\_\_\_\_

Email: \_\_\_\_\_

Dietary requirements: \_\_\_\_\_

Attendance:  in-person     via webinar

## PAYMENT OPTIONS FOR NON-MEMBERS

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## SUBMIT REGISTRATION FORM

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Fax: (07) 3856 4727

Phone: (07) 3872 2222

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