

MIND, BODY AND SPIRIT

Looking after yourself

FIRST ATTENDEE DETAILS:

Name: Dr / Mr / Ms / Mrs / Miss (Please circle) _____ Member Non-member

AMA Queensland member no: _____ In the employ of Dr: _____

Practice name: _____ Email: _____

Office phone: _____ Mobile: _____

Postal address: _____

Optional Yoga Session: Yes No

ADDITIONAL ATTENDEES AND TABLE OF 10 GROUP BOOKINGS:

(Please complete the table below with the names of any additional guests on your table – ALL names must be advised by no later than Friday 11 October).

First and last name	Student / DIT / Senior Doctor or Practice Staff	Email address (please include)	Dietary requirements	Yoga Session (yes/no)
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

PRICING CATEGORY:

	Individual registrations	Table of 10 Group booking registrations
Student/Doctor in Training (DIT) member	\$70	\$650
Member (Includes practice staff in the employ of members AND Queensland Women's Medical Society (QWMS))	\$75	\$700
Non-member	\$85	\$800

PAYMENT:

Credit card: Visa Mastercard AMEX

Amount: \$ _____

Card number: | | | | | | | | | | | | | | | | | | | | | |

Expiry date: ____/____ CCV: _____

Cardholder's name: _____

Signature: _____

Direct deposit: Contact the Events Team on (07) 3872 2222.

SUBMIT REGISTRATION FORM

Email: registrations@amaq.com.au
 Phone: (07) 3872 2222 Fax: (07) 3856 4727

Privacy information:
 AMA Queensland's primary purpose of collecting personal information on this form is to process your purchase. In providing your details you consent to your personal details being used in the manner indicated. ABN: 17 009 660 280