

Registration Form

Fourth Australian Positive Psychology and Well-being Conference University of Melbourne 7-9 February 2014

Standard Registration (after 31 October 2013)

| Registration Details - Please co | mplete a separate form for | r each re | gistration | or contact the or | ganisers for r | multiple registrations. | |
|---|----------------------------|--|--------------------|-------------------|---------------------|-------------------------|--|
| Title (Mr/Mrs/Ms/Miss/Dr): | | | | Last Name: | | | |
| Position Title: | | | | | | | |
| Organisation: | | | | | | | |
| Address: | | | | | State: | Postcode: | |
| Contact Tel: Email: | | | | | | | |
| Special requirements: (dietary, access etc) | | | | | | | |
| Profile Please indicate which industry sector you are from | | | | | | | |
| ☐ Academic | ☐ Business Services | ☐ Educ | | cation | | inance | |
| Government | ☐ Health | □м | | nufacturing | | Performing Arts / Sport | |
| Technology | ☐ Telecommunications | elecommunications | | r (Please specify |) | | |
| IMPORTANT: Do you agree to us using your details above for our data base in relation to future contact and marketing purposes? ☐ Yes, I agree ☐ No, I do not agree | | | | | | | |
| Registration Type (All amounts include 10% GST) | | | | Standard Ind | dividual | Standard Four or more | |
| 7-9 February - Full Conference and Pre-Conference Workshops | | | | \$995.00 | \$895.00 per person | | |
| 8-9 February - Two Day Conference only | | | | \$850.00 | \$765.00 per person | | |
| 7 February - Pre-Conference Workshops only | | | | | \$550.00 | \$495.00 per person | |
| REGISTRATION TOTAL AMOUNT DUE | | | IT DUE | \$ | | \$ | |
| | | | | | | | |
| Please indicate which pre-conference workshops you wish to attend on Friday 7 February | | | | | | | |
| Select ONE in the morning and ONE in the afternoon. | | | | | | | |
| 9am -12pm Positive Psychology and Health 9am -12pm Positive Psychology – Organisations and Leadership | | | | | | | |
| 9am – 12pm Emerging Researchers Symposium (Presented by students) | | | | | | | |
| | | | | | | | |
| ☐ 1pm – 4pm Positive Psychology – Sport and Leisure ☐ 1pm – 4pm Acceptance & Commitment Therapy | | | | | | | |
| 1pm - 4pm Geelong Grammar Toorak Campus Site Visit Fully Booked | | | | | | | |
| To assist with catering, please indicate if you will be attending the Welcome Cocktail Function on Saturday 8 February 5pm – 7pm. This function is included in your Conference registration (not available for Workshop Only registrations) Yes, I will attend | | | | | | | |
| Politicis Constitution of the Constitution of | | | | | | | |
| Payment Options Baldwin Consulting Group Tax Invoice ABN 42 084 622 933 1. By Direct Deposit: 2. By Credit Card: please complete details below | | | | | | | |
| Baldwin Consulting Group | | Note: A 3% + GST surcharge will be added to credit card payments | | | | | |
| Westpac BSB: 033305 Account: 363874 | | | Type of card: | | | | |
| Please use your SURNAME as the reference. | | | Card No. Amount \$ | | | | |
| 3. By Cheque: Please make cheques payable to: | | Jaiuin | <u> </u> | | | | |
| Baldwin Consulting Group Pty Ltd and post to: | | | <u> </u> | | | | |
| PO Box 2043, South Melbourne 3205 | | Cardho | lder nam | ie: | | Exp: / | |
| 4. On invoice: Please issue an invoice for payment. | | | lder sign | ature: | | Date: | |
| | | | | | | | |

Cancellation Policy: All cancellations must be advised to the organisers in writing.

Send completed form to the organisers:

Fax: 03 9645 9859

Before Friday 20 December 2013 - A full refund is available less a \$110 inc. GST cancellation fee.

After Friday 20 December 2013 - No refunds will be given after this date due to fixed cost commitments at the venue. A substitute can be nominated to take your place with no additional cost or penalty.

Email: admin@baldwinconsulting.com.au

Baldwin Consulting Group PO Box 2043 South Melbourne VIC 3205

All enquiries Tel: 03 9645 9858