

Thank you for choosing an S A Partners event.
 Please complete this registration form as soon as possible and email it to **sandie.butterworth@sapartners.com** so that we can secure a place for you.
 Payment is by credit card or invoice. **ABN :57 149 189 515**

Registration Form and Tax Invoice

How would you like to pay? Credit Card <input type="checkbox"/> Please invoice me <input type="checkbox"/>	
Which Workshop you would like to attend?	
Preferred Date/location	
Organisations Name and Address	
DELEGATE 1—Name	■
Job title	
Email address	
DELEGATE 2 – Name	
Job title	
Email address	
Card Holder Name	
Card Number	
Expiry date	

Please return completed forms to sandie.butterworth@sapartners.com

Terms & Conditions:

Places will be confirmed on receipt of payment in full. We reserve the right to refuse admission if payment has not been received in advance of the event. Notification of any substitutions should be made in writing in advance. Cancellations should be advised in writing. Cancellations received within 0-14 calendar days of the event start will incur a 100% cancellation fee. Cancellations received earlier than 15 calendar days before the event will incur a 50% cancellation fee. It may be necessary for reasons beyond the control of the organisers to alter the content, timing or location of the event.

Please tell us where you heard about this event _____