

CLUBS WA 2019 Event Series

clubs wa

**Secure
your spot**

REGISTRATION FORM

To reserve your seats please send in your completed registration form as soon as possible.

Please email your completed registration form to admin@clubswa.com.au or fax to 1300 503 907.

Event/workshop details

Event: _____ Date: _____

Venue: _____ Time: _____

Attendee details

Club: _____

ATTENDEE 1

Name: _____ Position: _____

Email: _____ Mobile: _____

Special Reqs (if any): _____

ATTENDEE 2

Name: _____ Position: _____

Email: _____ Special Reqs (if any): _____

ATTENDEE 3

Name: _____ Position: _____

Email: _____ Special Reqs (if any): _____

Payment details

Total attendees _____ x Workshop price (inc. GST) _____ = _____

SELECT PREFERRED PAYMENT METHOD (AMEX cards cannot be accepted)

Credit Card (Visa or Mastercard only)

Card No: _____ / _____ / _____ Expiry Date: _____

Name on Card: _____ CVC: _____

Signature: _____ Date: _____

OR Cheque (Please attach to registration and make cheque payable to Clubs WA. Post to PO Box 5101 South Lake WA 6164)

OR EFT direct transfer (Please include confirmation of EFT payment with registration and deposit into the following bank account) **Account Name:** Clubs WA Incorporated **BSB:** 302 162 **Account No:** 117 4484.

IMPORTANT: Please put your Club name AND which workshop you're attending in the payment description.