

EXECUTIVE SUMMIT 2008 REGISTRATION FORM

The Essence of Management

Tax Invoice ABN: 51 097 286 756 WISE Asia Pacific Ltd

Office use only

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(Please complete all sections and use a separate Form for each delegate)

DELEGATE INFORMATION –

Surname: Title: Given Name:
Organisation/Company: Position:
Address:
Suburb/Town: State: Country: Post code/Zip:
Tel:(Bus) Fax: Mobile: E-mail:

NAME BADGE: (please print your name as you would like it to appear on your name badge)

Delegate: Organisation:
Partner Name: (for those attending Social Functions Only)

SECTION A: REGISTRATION FEES

– (All amounts are quoted in Australian Dollars and include GST)

Full Registration Fee includes: Convention and all meals and tickets to all Social Functions.

Daily Registration Fee includes: Convention, all meals and ticket to the Social Function on nominated day ONLY.

Please note: To qualify for any of the Early discounted rates, FULL payment must be received BEFORE the closing date indicated below.

	Early before 31.3.2008	Full Price from 1.4.2008	Fee
Full Registration	<input type="checkbox"/> (D03) \$1,148.00	<input type="checkbox"/> (D04) \$1,248.00	\$
Daily Registration			
Saturday		<input type="checkbox"/> (D05) \$440.00	\$
Sunday		<input type="checkbox"/> (D06) \$440.00	\$
Monday		<input type="checkbox"/> (D07) \$440.00	\$
Total Section A			\$

PLEASE NOTE: The special Convention Breakfast is included in the Full Registration Fee. Breakfast for accompanying persons, family and guest can be charged back to the room.

SECTION B: ADDITIONAL FUNCTION TICKETS

– (to be completed ONLY if you require additional tickets for family or guests, as tickets for all Meals and Social Functions are included in Full Registrations)

Friday Evening Dinner	(F01) No.	@\$30.00	\$
Saturday Lunch	(F02) No.	@\$25.00	\$
Saturday Evening Awards Dinner (MAKH)	(F03) No.	@\$80.00	\$
Sunday Lunch	(F04) No.	@\$25.00	\$
Sunday Evening Dinner	(F05) No.	@\$60.00	\$
Monday Lunch	(F06) No.	@\$35.00	\$
Total Section B			\$

SECTION C: ACCOMMODATION BOOKINGS AND FERRY TRANSFERS

SPECIAL CONVENTION RATES

These special rates are available ONLY if booking is made through the Summit Secretariat. Reservations will be confirmed in order of receipt.

These rates apply for 3 days prior and 3 days following the Summit. To secure your accommodation, payment details for a minimum of one night's accommodation and ferry transfers, MUST accompany this Registration Form. Payment may be by Cheque, Electronic Transfer or by Credit Card. (If payment is by Credit Card, the card number ONLY will be forwarded to the Resort, (your account will not be debited until check-out). Payments by Cheque or Electronic Transfers for the accommodation deposit will be forwarded to the Resort on your behalf. The balance of your accommodation account must be paid direct to the Resort upon departure.

Room Occupancy

Single Twin/Double Triple Quad

The following rates are the minimum deposits required per room type per night. The deposit amount forwarded MUST include return ferry transfers for each person/persons.

For your convenience we are offering TWO types of accommodation Please visit the website at www.couran.com/accommodation/ before making your selection

DELUXE: for individuals and couples

	Standard	Total
Room type and Occupancy	Deposit required from 1.3.08	Room Deposit and Ferry Transfer
Single – Marine Room (1 per room per night) 1 x return Ferry ticket	<input type="checkbox"/> (H02) \$195.00 \$25.00	\$
Twin share/Double – Marine Room (2 per room per night) 2x return Ferry tickets	<input type="checkbox"/> (H04) \$195.00 \$50.00	\$
Quad share – Marine Lodge Minimum of 4 persons(2 x couples) OR (4 – 6 family members) Ferry tickets @ \$25.00pp return	<input type="checkbox"/> (H06) \$441.00 \$100.00	\$

BUDGET: for families and groups who wish to share accommodation

Standard	Total
Room type and Occupancy	Room Deposit and Ferry Transfer
Triple share – Marine Room (3 per room per night) 3 x return Ferry tickets	<input type="checkbox"/> (H08) \$235.00 \$75.00 \$
Quad share – Marine Suite (4 per room per night) 4 x return Ferry tickets	<input type="checkbox"/> (H10) \$301.00 \$100.00 \$
Total Section C \$	

Number of persons sharing accommodation:

Adults _____ **Children** _____

I will be sharing with: Second Person: _____
 Third person: _____
 Fourth Person: _____

ARRIVALS and DEPARTURES including FERRY TRANSFERS (Refer to www.couran.com for ferry times)

Arrival Date: _____ Approximate Time: _____
 Preferred Ferry time: _____

Departure Date: _____ Approximate Time: _____
 Preferred Ferry time: _____

SPECIAL REQUESTS

I require wheel chair accessibility

Other – please specify _____

CATERING NUMBERS

To assist us with catering please place the number of persons attending each function in the appropriate box and include the additional social function ticket holders.

Dinner – Friday Dinner – Sunday
 Lunch – Sunday Dinner – Saturday
 Lunch – Saturday Lunch – Monday

Tax Invoice for GST

This Registration Form is recognised as a Tax Invoice. However, if you require a separate Tax Invoice, please indicate below the Name and Street address of the person to whom the Tax Invoice should be made out: _____

PLEASE SIGN THIS REGISTRATION FORM

This booking is invalid without a signature

Signature: _____ Date: _____
 Print name: _____

A confirmation of your Registration will be forwarded to you

PAYMENT OF REGISTRATION FEE

Payment Summary

Total Section A - Registration Fee AUD\$ _____
 Total Section B - Additional Function Tickets AUD\$ _____
 Total Section C - Accommodation Deposit including Ferry AUD\$ _____

TOTAL AMOUNT DUE AUD\$ _____

PAYMENT OPTIONS (ALL PRICES INCLUDE GST)

Cheque:

I have enclosed a cheque for: \$ _____

Please make your cheque payable to: 'WISE Asia Pacific'
 OR

Electronic Funds Transfer

I have transferred the amount of: \$ _____

To: WISE Asia Pacific Ltd
 National Australia Bank
 BSB: 082 080
 A/C: 57373 4028 (WISE F01 ACCOUNT)

Remittance Advice Number: _____
 (please advise the Secretariat as soon as EFT payment has been processed by calling Marion at (07) 3254 0522 or Fax (07) 3254 0406.)

OR

Credit Card

Please charge the total of Section A and B to the following Credit Card: \$ _____

(Credit card number only is required for accommodation deposit)

MASTERCARD VISA CARD AMEX

(No other cards will be accepted)

Card Number: _____ Expiry Date: _____

Cardholder's Name: _____

Signature: _____ Date: _____

The debit to your credit card statement will appear as 'WISE Asia Pacific Ltd'.

PLEASE COMPLETE THIS FORM AND RETURN BY EMAIL, POST OR FAX WITH PAYMENT TO:

SUMMIT SECRETARIAT
 ACCLAIM Special Events and Meeting Management
 371 Bowen Terrace
 NEW FARM QUEENSLAND 4005 AUSTRALIA
 TEL: 07 3254 0522 FAX: 07 3254 0406
 Email: execsummit@acclaimsemm.com.au
 Website: www.wiseanzo.org

Privacy Policy

Unless directed, in registering for this Summit relevant details will be incorporated in a Delegates' List for the benefit of all Delegates and may be made available to parties directly related to the Summit including Acclaim (Registration only), Couran Cove Island Resort (accommodation only) and WISE Asia Pacific Ltd.

I do not wish my details to appear on the Delegate list.