




# TAKING CONTROL, TAKING ACTION

## Registration Form



Please complete one registration form per person and copy as required

Family Advocacy Inc.  
ABN is 14 743 342 196

CONTACT DETAILS					
<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Dr		Name			
Address					
Suburb				Postcode	
Phone		Mobile			
				Fax	
Do you use a wheelchair or other aids for mobility?				<input type="checkbox"/> YES <input type="checkbox"/> NO	
Will you be accompanied by a support person?			Name of Support Person		
<input type="checkbox"/> YES <input type="checkbox"/> NO			_____ _____		
Do you have any special dietary requirements?			<input type="checkbox"/> Vegetarian <input type="checkbox"/> Vegan <input type="checkbox"/> Other		
<input type="checkbox"/> YES <input type="checkbox"/> NO			Please specify		
			_____ _____		
Do you have any other support arrangements that we should be aware of?					
_____ _____					
DAYS ATTENDING Tick the day/s you would like to attend					
<input type="checkbox"/> <b>Day 1</b> <b>Thursday, 16 September</b> 9am for 9:30am – 3pm <b>Payneham Library</b> Corner of O.G. Road & Turner St, Felixstow <b>\$30</b>		<input type="checkbox"/> <b>Day 2</b> <b>Friday, 17 September</b> 9am for 9:30am – 12pm <b>Our Space</b> Ground Floor 104 Greenhill Road, Unley <b>\$30</b>		<input type="checkbox"/> <b>BOTH DAYS</b>  <b>16 &amp; 17 September</b>  <b>\$45 total</b>	



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OPTIONS FOR REGISTRATION			
<input type="checkbox"/>	<b>Fax</b>	(08) 8340 4452	
<input type="checkbox"/>	<b>Email</b>	<a href="mailto:faiadmin@familyadvocacy.org.au">faiadmin@familyadvocacy.org.au</a>	
<input type="checkbox"/>	<b>Mail</b>	Family Advocacy, 5 Ninth Street, Bowden SA 5007	
<input type="checkbox"/>	<b>In Person</b>	Family Advocacy, 5 Ninth Street, Bowden SA 5007	
MY PAYMENT OPTIONS			
<input type="checkbox"/>	<b>Cheque/Money Order</b>	Made payable to 'Family Advocacy Inc.'	
<input type="checkbox"/>	<b>EFT into Bank Account</b>		
	<b>Account Name</b>	Family Advocacy Inc.	<b>Bank</b> Bank SA
	<b>BSB</b>	105-022	<b>Account Number</b> 112 452 240
<input type="checkbox"/>	<b>Cash</b>	Delivered in person only, with application.	
PLEASE NOTE			
<p><b>Confirmation</b> Upon receipt of registration a confirmation note will be sent.</p>			
<p><b>Privacy</b> When registering for this event we will collect personal information about you. We will only use your details to keep you informed about the activities of the Association. We will not pass on your personal details to any party without your permission.</p>			
We welcome your attendance at this conference and look forward to seeing you			