



41st Annual District Convention

Where	Geelong Victoria
When	Thursday 20 – Sunday 23 August 2009
Chairman	Sam Neumann Email: neumannsn@optusnet.com.au Phone: 0400602417
Convention email	kiwanisgeelong@gmail.com
Convention Fax	03 5244 1574
Postal Address	Kiwanis Club of Geelong-Convention PO BOX 429 Geelong Vic 3220

Registration Form

You may type into these fields, save the form and email to kiwanisgeelong@gmail.com

OR

Print the form, complete by hand and post to address above

Payment in full must accompany your form to be registered

See next page. Payment can be made by cheque, credit card or Electronic Funds Transfer

Name						
Partner (if attending)						
Club						
Address						
Town						
State			P/code			
Home Ph	()		Mobile Ph			
Fax No	()		Email			
STATUS (Delete status not applicable)	First Timer	Yes/No	Delegate at Large	Yes/No	Life Member	Yes/No
*FIRST TIMERS:						
Free registration only applies if full registration and attending both Friday & Saturday evening functions						

When completing this form please insert "Y" in the shaded column next to your each of selections. Add each selection to the register fee and place total \$ in Total Column

Full Registration	Register Fee		Thursday Evening Reception		Lunches				Evening Functions				Sunday lunch		Total \$
					Fri	Sat			Fri	Sat					
Member	\$90		\$15		\$20		\$20		\$35		\$35		\$20		\$
Member *First timer	\$0		\$15		\$20		\$20		\$35		\$35		\$20		\$
Partner / Non member	\$40		\$15		\$20		\$20		\$35		\$35		\$20		\$
Partner First timer - Must be a Kiwanis Member	\$0		\$15		\$20		\$20		\$35		\$35		\$20		\$
Extra Guest	\$40		\$15		\$20		\$20		\$35		\$35		\$20		\$

One Day Registration	Register Fee		Thursday Evening Reception		Lunches				Evening Functions				Sunday lunch		
					Fri	Sat			Fri	Sat					
Member	\$50		\$15		\$20		\$20		\$35		\$35		\$20		\$
Member *First timer	\$50		\$15		\$20		\$20		\$35		\$35		\$20		\$
Partner / Non member	\$30		\$15		\$20		\$20		\$35		\$35		\$20		\$
Partner First timer - Must be a Kiwanis Member	\$30		\$15		\$20		\$20		\$35		\$35		\$20		\$
Extra Guest	\$30		\$15		\$20		\$20		\$35		\$35		\$20		\$

Day Tours						Friday		\$25		Saturday				\$25		\$
TOTAL COST															\$	
Vegetarian																
Other dietary needs			Please contact Convention Chairman													
Special access needs Please give details																

Method of Payment – Place X in the correct box and complete details below as appropriate

1	<input type="checkbox"/>	Credit Card
2	<input type="checkbox"/>	Electronic Funds Transfer
3	<input type="checkbox"/>	Cheque/Money Order

1. CREDIT CARD Place X in the correct box

Card Type

<input type="checkbox"/>	VISA
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<input type="checkbox"/>	MasterCard
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<input type="checkbox"/>	BankCard
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Card Number

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Expiry Date

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Name of Card Holder:

<input type="text"/>

I hereby authorise Kiwanis Club of Geelong to debit my Card Account with the amount specified above.

This authority shall stand, in respect of the above specified Card and in respect of any Card issued to me in renewal or replacement thereof.

Signature _____

(if posting hardcopy)

Date:

dd mm yyyy

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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2. ELECTRONIC FUNDS TRANSFER (EFT)

BSB: 033275 A/C No: 190334 Account Name: Kiwanis Club of Geelong Convention

Bank: Westpac Banking Corporation (Newcomb Branch)

Reference:

(Use initial and surname)

Date of EFT transaction:

<input type="text"/>	<input type="text"/>	<input type="text"/>
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3. CHEQUE / MONEY ORDER

Payable to Kiwanis Club of Geelong Convention 2009 and forwarded to: Convention Registrations, PO Box 429, Geelong Vic 3220. Provide full name on the back.