



# Women in Finance Event Registration Form

WIF Event: **The Great Debate Breakfast**

Registration Contact: \_\_\_\_\_

Organisation: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

Booking Name: \_\_\_\_\_

Attendee name/s:

- 1. \_\_\_\_\_ 2. \_\_\_\_\_
- 3. \_\_\_\_\_ 4. \_\_\_\_\_
- 5. \_\_\_\_\_ 6. \_\_\_\_\_
- 7. \_\_\_\_\_ 8. \_\_\_\_\_
- 9. \_\_\_\_\_ 10. \_\_\_\_\_

2008 Events	Month
Financially famous cocktail evening	April 10th
May breakfast	May 13th
The great debate breakfast	July 10th
September breakfast	Sept 3rd
Annual race day	October 8th
Christmas lunch	December 5th

**For Event Inquiries:**  
 Julianne De Groot  
 Ph: 1300 346 742  
 Fax: (07) 3002 0799  
 Email: [j.degroot@finsia.com](mailto:j.degroot@finsia.com)

**Membership Contacts**

**Individual:**  
 Katherine Stirling 07 3835 5242

**Corporate:**  
 Emma Bampton 0401251901

### Fee Terms

On full payment, this forms a TAX INVOICE for GST purposes. Please note Women in Finance is not registered for GST.

### Terms and Conditions:

1. Women In Finance reserves the right to cancel this event due to insufficient numbers. Registrants will be notified if this occurs and payment refunded in full. 2. Registrations for this event must be accompanied by full payment. 3. Registrants will be liable for payment in the event of non-attendance unless cancellation or request for transfer is made in accordance with clause 4 below. 4. Cancellations or transfers must be advised in writing and received by Women in Finance at least 7 days prior to the event. Refunds will not be granted if a registrant fails to attend an event or cancels/transfers within 7 days of the event.

### Payment Details

#### Number of people attending:

\_\_\_\_\_ x \$50.00 Members

\_\_\_\_\_ x \$70.00 Non-Members

\_\_\_\_\_ x \$500.00 Corporate Table of 10

**Total \$** \_\_\_\_\_

Enclosed is my cheque for \$\_\_\_\_\_ made payable to "Women In Finance" ABN 66 450 732 775

OR please debit my Credit Card  Visa  MasterCard

Card No. \_\_\_\_\_ Expiry Date \_\_\_\_ / \_\_\_\_

Name on card: \_\_\_\_\_

Signature: \_\_\_\_\_

**Send to GPO Box 1673, Brisbane Q 4001 or Fax 07 3002 0799**