



2010 Sports Trainer Conference Registration Form				
Name:				
Address:				
Suburb:		State:	Postcode:	
Phone:	bh:	ah:		
	Mobile:	Fax:		
Email:				
Registration Type <input checked="" type="checkbox"/> - <i>Please tick</i>				
Early Bird - <i>Early Registration available until 5.00pm 23rd October 2009</i>				Fee
	Member Early			\$95
	Non-Member Early			\$135
	Student Early *			\$80
Late				
	Member Late			\$135
	Non-Member Late			\$165
	Student Late *			\$120
Please Note: <i>Sports Trainer Accreditation is not equivalent to SMA Membership. SMA Membership is available to all Sports Trainers.</i>				
<i>*Please attach a copy of your fulltime student ID card to registration form.</i>				
Payment Type				
<input checked="" type="checkbox"/> - <i>Please tick</i>				
	Cash			
	Please find enclosed cheque for \$_____			
	Please debit \$_____ from my:		a) MasterCard	b) VISA
			c) Bankcard	
Card Number:	/	/	/	Expiry: /
Signature:				
Please complete and return:				
Via Fax: 02 8116 9760		Via Post: Sports Medicine Australia - NSW Branch PO Box 3176 Rhodes Shopping Centre Rhodes NSW 2138		
Cancellation Policy				
All cancellations must be notified in writing to SMA NSW. All cancellations will incur an administration fee of \$30.00. No refund will be provided after Friday 15th October 2010.				