

ENROLLED NURSE PROFESSIONAL ASSOCIATION

Enrolled Nurse Conference

19th and 20th September 2019

Newcastle NSW

REGISTRATION FORM



TAX INVOICE - RETAIN A COPY FOR YOUR RECORDS - ABN 23 095 642 978

Please Print Details

ENQUIRIES & REGISTRATION:

Please direct all enquiries and registrations to:

Enrolled Nurse Professional Association

PO Box 775

KINGSWOOD NSW 2747

Tel: 1300 554 249

N.B.

EMPLOYERS REQUIRING AN INVOICE contact

Pia- enpatreasurer@gmail.com

- Payment by Cheque or Money

Order payable to Enrolled Nurse Professional Association.

Direct Deposit details below.

- GST is included in all fees

Program Times

19th September

Registration 0800 –0900

20th September

Registration 0800 - 0830

VENUE:

Noahs on the Beach
Corner Shortland &
Zaara Street
Newcastle 2300

Title: Mr ☐ Mrs ☐ Ms ☐

Given Name:

Surname:

Postal Address:

City:

State: P/Code:

Telephone: Mob:

E-Mail:

Special Health Dietary Requirements.....

Area of Practice.....

REGISTRATION CLOSES 1st September 2019

PLEASE INDICATE YOUR ATTENDANCE BY CIRCLING THE DAY—DAYS YOU ARE ATTENDING

| | | |
|--|-----------|----------|
| ENPA Member | Thursday | \$175.00 |
| Conference Registration Fee | Friday | \$175.00 |
| Includes: Morning Tea, Lunch, Afternoon tea & attendance at all sessions | | |
| | Both Days | \$350.00 |

| | | |
|--|-----------|----------|
| NON Members | Thursday | \$200.00 |
| Conference Registration Fee | Friday | \$200.00 |
| Includes: Morning Tea, Lunch, Afternoon tea & attendance at all sessions | | |
| | Both Days | \$400.00 |

| | |
|-------------------|----------|
| Conference Dinner | \$ 70.00 |
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DIRECT DEPOSIT

Enrolled Nurse Professional Association

BSB 814 282

A/C 10161865

Ensure your name is included in the deposit description.

Please send details of your deposit WITH your registration form.

Total

\$

REGISTRATION & PAYMENT:

Office Use Only

Cheque #.....Amount \$.....

Money Order #.....Amount \$.....

Receipt #.....