

OPENING YOUR EYES TO CONTACTS

CLIC HERE

09

CLIC is formed under the auspices of the Medical Technology Association of Australia (MTAA)

MTAA ABN: 61 129 334354

Doltone House Sydney, July 9 & 10, 2009

All Enquiries

P.O Box, 39, Mt. Martha, VIC 3934
P: 03 5977 0244 F: 03 5977 0260
E: info@corporatecommunique.com.au

Delegates Registration Form

- Please complete a separate registration form for each delegate. All fees in these forms are inclusive of 10% GST.
- Once completed, please send all forms, including all fees to:
CLIC Here 09: C/- Corporate Communiqué
P.O Box 39, Mt Martha, VIC 3934 or Fax to 03 5977 0260

If you have any queries regarding the registration forms please contact our conference organiser, Corporate Communiqué on Ph: 03 5977 0244 or Email: info@corporatecommunique.com.au

1

Your Details

Title: _____ Family Name: _____ Given Name: _____

Mailing Address: _____ City: _____

State: _____ PCode: _____ Contacts (W): _____ (H) _____

Email (required for conference correspondence) _____

2

Registration Type

All registrations to the conference include:

- Morning/afternoon teas and lunches during the conference period
- Networking Cocktails and Canapés
- Conference Opening Ceremony
- Complimentary Conference Satchel
- Final 'Program & Abstracts' book

Earlybird Registration (expires May 31, 2009)

<input type="checkbox"/>	CCLS* Member	\$375.00
<input type="checkbox"/>	Non CCLS* Member	\$425.00
<input type="checkbox"/>	2007, 2008 or 2009 Graduate	\$275.00
<input type="checkbox"/>	Practice Managers	\$275.00
<input type="checkbox"/>	CCLS Member Day Only	\$285.00
<input type="checkbox"/>	Non CCLS Member Day Only	\$320.00

Standard Registration (after May 31, 2009)

<input type="checkbox"/>	CCLS* Member	\$475.00
<input type="checkbox"/>	Non CCLS* Member	\$525.00
<input type="checkbox"/>	2007, 2008 or 2009 Graduate	\$275.00
<input type="checkbox"/>	Practice Managers	\$275.00
<input type="checkbox"/>	CCLS Member Day Only	\$360.00
<input type="checkbox"/>	Non CCLS Member Day Only	\$395.00

For Day Only Registrations, please specify day of attendance: _____

* CCLS = Cornea & Contact Lens Society (Australia & New Zealand)

We have chosen three accommodation venues for delegate accommodation. In order to cater for differing budgets, the three options vary in cost and style. The Conference Committee have negotiated highly discounted rates for CLIC HERE 09 delegates. To ensure you receive the discounted rate, please book your accommodation using this registration form.

* To confirm your accommodation, one night's deposit must be submitted with your booking

* **If you are sharing a room with another delegate, only one person needs to complete a booking**

1. Novotel Sydney Darling Harbour

- Harbour View Room (Queen) \$219.00 per room, per night (including breakfast)
- Harbour View Room (Twin) \$219.00 per room, per night (including breakfast)

* Rates are for a maximum of 2 people. An extra person is at a cost of \$60 per night

2. Ibis Hotel Darling Harbour

- Harbour View Room (Queen) \$135.00 per room, per night
- Harbour View Room (Twin) \$135.00 per room, per night

* Breakfast is available for an extra \$17.50 per person. Please advise the hotel on check in if you wish to book

3. Grand Mercure Apartments

- 2 Bedroom Pyrmont View \$399.00 per apartment, per night
- 2 Bedroom Harbour View \$399.00 per apartment, per night

* Rates are for a maximum of 2 people. An extra person is at a cost of \$60 per night

* Breakfast is available for an extra \$29 per person. Please advise the hotel on check in if you wish to book

Check Out Date: _____

Check Out Date: _____

I will be sharing my room with: _____

I understand that if I'm sharing with another delegate, only one of us needs to book accommodation

Special Requirements

Networking Cocktails and Canapés

All registrations include our Networking Cocktails and Canapes function on Thursday night from 5.15pm - 7.00pm. To assist with the planning of the evening, please indicate below if you will be attending this function and any special dietary requirements you may may.

- Yes, I will be attending the Networking Cocktails and Canapes
- No, I will be unable to attend the Networking Cocktails and Canapes

I have the following (medically related) dietary requirements.

Registration	\$ _____
Conference Accommodation Deposit (1 night)	\$ _____
TOTAL PAYMENT DUE	\$ _____

PAYMENT - Payment may be made by cheque, payable to Corporate Communique, or by credit card.

Please indicate payment preference

- Cheque [payable to Corporate Communique]
mailed to CLIC Conference, C/- P.O Box 39, Mt Martha, VIC 3934
- Mastercard Visa [a 2.5% fee will be added for credit card payments]

Card Number:

Exp Date: ____/____ Name of cardholder: _____ Signature: _____

Cancellations/Refund Policy - All cancellations and requests for refunds must be in writing and received no later than June 10, 2009. A handling fee of \$50 will be deducted from each cancelled registration prior to this date. NO REFUNDS will be given after June 10, 2009.