

Tourette Syndrome

ANNUAL NATIONAL CONFERENCE

CANBERRA
MAY 13TH 2017

Take 5 for Tourettes

Registration Form & Tax Invoice

Tourette Syndrome Association of Australia Inc. ABN: 76 104 434 459

*Please retain a copy of this form as it will become your tax invoice when payment is received.
You will only be notified if your application is unsuccessful.*

**Please complete the following registration details and post to P.O. Box 1173 Maroubra NSW 2035
OR Fax to (02) 9382 3764 OR email to: info@tourette.org.au Phone inquiries (02) 9382 3726.**

CANBERRA: May 13th 2017, 9.15am-4pm
Canberra Institute of Technology
Room 1 and 2
37 Constitution Ave,
Reid ACT 2601 ACT 2601

COST: \$45 TSAA Members (Includes Family Pack)
\$55 Non Members (Includes Family Pack)
\$20 12-18 years
\$55 Professionals (Includes Doctor's Pack)

NOTE: Registration and payment is required by
7th May 2017 for catering purposes

Name/s _____

Address _____

Email _____ Phone _____

Select: X Member \$45, X Non Member \$55, X 12-18 years \$20, X Medical Professional \$55

Number of Tickets purchased in total Amount Enclosed/Paid \$ _____

Payment method **Cheque (to Tourette Syndrome Association of Australia Inc.)**

**Direct Deposit BSB: 062-155 Account number: 10572832
Commonwealth Bank of Australia
Account Name: Tourette Syndrome Association of Australia Inc.
NB: Please leave surname & Initial as reference**

Paid online: http://www.tourette.org.au/product-category/events_activities/

TOURETTE SYNDROME ASSOCIATION OF AUSTRALIA INC.

CFN10232 ABN 76 104 434 459

**E: info@tourette.org.au P: (02) 9382-3726
www.tourette.org.au**

P.O. Box 1173 Maroubra, NSW 2035