|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **2019 DELEGATE DETAILS** | Delegate Name: | | | | | | | | | | |
| NSWAA Member   Insert number................. | | Other Apiarists' Association Member Association……………….. Member No ................. | | | | | | Non-member | | | |
| Address: | | | | | | | | | | | |
|  | | | | | | | | | | | |
| Phone/Mobile: | | | Email: | | | | | | | | |
| **A - FULL CONFERENCE REGISTRATION - Each registration includes all conference sessions on Thursday 16 & Friday 17 May 2019, access to the Trade Show and 1 ticket to the Wine & Cheese night, morning tea and lunch both days** | | | | | | | | | | | |
| Member (includes member NSW Amateur Beekeepers Association) ................................................ Partner of a Member Insert partner name ........................................................... Non-Member.................................................................................................. | | | | | | |  | | $250 $170 $350\* | | |
| EARLY BIRD RATES - **if paid by 31 March 2019** Member (includes member NSW Amateur Beekeepers Association) ............................................... Partner of a member Insert partner name............................................................ Non-Member.................................................................................................. | | | | | | |  | | $200 $150 $300\* | | |
| \* Non-members tick here  if you do not wish to automatically become a base level member of the NSW Apiarists' Association | | | | | | | | | | | |
|  | | | | | SUBTOTAL **A** | | | | | $ GST inc | |
| **B - I/2 DAY BUSINESS SESSION –** Subsidised by NSWAA   |  |  |  | | --- | --- | --- | | * **Manage Damage,** applying a financial approach to solving non-financial risks for business, boards and senior leaders to reduce the cost of damage and negative impact. * **Beyond Blue** ‘from 3.00 pm FREE- just drop in’ | | | | No. Attending …… @ $**XX** /person | SUBTOTAL B | $ GST inc | | | | | | | | | | | | |
| **C - ADDITIONAL TICKETS - Please purchase one day tickets, dinner tickets and any additional wine & cheese night tickets here** | | | | | | | | | | | |
| One Day Member (includes member NSW Amateur Beekeepers Association)............................  One Day Partner of a Member Insert partner name....................................... One Day Non-Member.............................................................................. | | | | | | Day 1 or Day 2 Day 1 or Day 2 Day 1 or Day 2 | | | $150 $100 $180 | | |
| EARLY BIRD RATES - **if paid by 31 March 2019** One Day Member (includes member NSW Amateur Beekeepers Association) ...........................  One Day Partner of a Member Insert partner name....................................... One Day Non-Member ............................................................................ | | | | | | Day 1 or Day 2 Day 1 or Day 2 Day 1 or Day 2 | | | $125 $90 $150 | | |
| Annual Dinner –Sponsored by **XXXXXXXX** - Friday 17 May 2019 | | | | No. Attending ..... @ $50 / person | | | | | $ | | |
| Wine & Cheese Night sponsored by **XXXXXXX** - Thursday 16 May 2019 | | | | No. Attending ..... @ $20 / person | | | | | $ | | |
|  | | | | SUBTOTAL **C** | | | | | | $ GST inc | |
| **D- RESOURCE FUND** | | | | | | | | | | | |
| I would like to make a gift to the NSW Apiarists' Association Resource Fund SUBTOTAL **D** | | | | | | | | | | | $ |
| **TOTAL PAYMENT (A + B + C + D):** | | | | | | | | | **$** AUD | | |
| **Registrations including full payment must be received by 1 May 2019. Late registrations received after this date can not be guaranteed and will only be accepted at the discretion of the Executive Council. If accepted a 20% loading may be applied.** | | | | | | | | | | | |

**PAYMENT DETAILS:**

Preferred method of payment via website  [www.nswaa.com.au](http://www.nswaa.com.au)

Or  Credit Card (Visa / MasterCard) Please charge my credit card **$.........................**

Credit card number: ........................................................................................................................... Expiry Date: ................... CCV: .............

Name on credit card: ............................................................................. Signature: ...................................................... Date: .......................

Or  I have attached a cheque / money order

*This document becomes a tax invoice/receipt once payment in full has been made. Please retain a copy for your records.*