

# Participant Registration Form/Tax invoice

ABN: 6161 6369 313

Sections marked with \* are mandatory.

Places in this program/workshop may be limited, so early registration is important.



**Murdoch**  
UNIVERSITY  
EXECUTIVE EDUCATION CENTRE

## \*Program/Workshop/Event

Program/Workshop/Event Title: \_\_\_\_\_

Program/Workshop Code: \_\_\_\_\_ Date of Program/Workshop: \_\_\_\_\_

Duration : \_\_\_\_\_ (days) Total Cost (including GST): \_\_\_\_\_

## \*Person responsible for this booking

Contact Name: \_\_\_\_\_

Organisation Name: \_\_\_\_\_

Organisation Address: \_\_\_\_\_

Contact Email: \_\_\_\_\_ Telephone: \_\_\_\_\_

## \*Participant Details

Title: \_\_\_\_\_ Surname: \_\_\_\_\_

Given Names: \_\_\_\_\_

Organisation: \_\_\_\_\_

Position Title: \_\_\_\_\_ Email: \_\_\_\_\_

Work Telephone: \_\_\_\_\_ Mobile: \_\_\_\_\_

## \*Work Address

No/Street: \_\_\_\_\_

Suburb: \_\_\_\_\_

State/Country: \_\_\_\_\_ Post Code: \_\_\_\_\_

## Previous Post-Secondary Education

Include details of previous university study, TAFE certificates, diplomas or other technical qualifications, or progress towards these:

Course/Qualification	Institution
_____	_____
_____	_____
_____	_____
_____	_____

Please let us know if you have any special needs, e.g., dietary?

\_\_\_\_\_

