

WMAA SEMINAR REGISTRATION FORM / TAX INVOICE

Please complete one form for each attendee

Seminar: _____
Date: _____
Location: _____

CORPORATE OFFICE:
Suite 3A, Level 3
5 Belmore Street
BURWOOD NSW 2134
t 02 8746 5000
f 02 9701 0199
e enquiries@wmaa.asn.au
w www.wmaa.asn.au
ABN 78 071 897 848

BILLING INFORMATION

Company: _____
Address: _____
City: _____ State: _____ Postcode: _____
Contact: _____ Position: _____
Email: _____

ATTENDEE INFORMATION

☐ Mr ☐ Ms ☐ Mrs ☐ Miss ☐ Dr ☐ Other: _____
Name: _____ Position: _____
Address (if different from above): _____
City: _____ State: _____ Postcode: _____
Phone: (0) _____ Fax: (0) _____
Mobile: _____
Email: _____
Special Requirements: _____
Please list any individual requirements e.g. dietary, wheel chair access, etc

REGISTRATION

☐ WMAA Member \$ _____ ☐ Non Member \$ _____

PAYMENT

Please note: Full payment is due at time of registration and can be made by Visa, Mastercard, AMEX or Diners. Registrations where payment can only be made by cheque or EFT must be submitted by faxing a completed written registration form along with a company issued purchase order. Purchase orders will only be accepted from approved member companies.

☐ Visa ☐ MasterCard ☐ AMEX ☐ Diners
Amount: \$ _____ Expiry Date: _____ / _____
Card Number: _____ CCV: _____
Cardholder Name: _____
Cardholder Signature: _____

Please note: This form becomes a Tax Invoice upon receipt of payment.
A confirmation/receipt will be sent by WMAA National Office once this form has been processed.

Please send your completed form via fax: 02 9701 0199 or email: registration@wmaa.asn.au

WMAA supports members in achieving sustainable waste and resource management across Australia.
We do this through leadership, collaboration and knowledge sharing.

Professional • Proactive • Collaborative • Informative