

# Primary Teachers' Association Conference 2008

## UP 5, 6, 7 – Upper Primary Up & Running!

Registration Form/Tax Invoice (ABN 56 093 922 331)

Name  School

Address  Postcode

Phone  Fax  Email

### CONFERENCE OPTIONS

	Cost (inc GST)	Cost for me
<b>Pre Conference Workshops (FRIDAY 27 JUNE)</b> 1) Contemporary Issues in Primary Teaching: a focus on languages and literacy 2) Arts in Society: what about Perth? 3) Emotional Intelligence in the Classroom	\$88 \$55 \$55	
<b>Deluxe Conference Package</b> Starts 5pm Saturday – includes coffee on arrival, pre dinner drink, conference program from 5pm Saturday including dinner, morning tea, lunch, afternoon tea and program Sunday	\$375 <b>Early Bird (March 25)</b> \$340	
<b>Day Only Options</b> <b>1) Saturday ONLY</b> Includes Saturday program from 5pm, coffee on arrival, pre dinner drink, dinner and evening program (EXCLUDES pre conference workshops) <b>2) Sunday ONLY</b> Includes coffee on arrival, lunch, morning & afternoon tea and Sunday program	\$210 \$220	

### WORKSHOP SELECTIONS

Session A	Session B	Session C
1 2 3 4 5	1 2 3 4 5	1 2 3 4 5

### ACCOMMODATION OPTIONS

	TWINSHARE PER PERSON/PER NIGHT	SINGLE OR DOUBLE ROOM PER NIGHT	Cost for me (incl. GST) AUD
Medina Grand 1 Bedroom Apartment		<input type="checkbox"/> \$226	
Parmelia Hilton	<input type="checkbox"/> \$127.50	<input type="checkbox"/> \$255	
Emerald Hotel	<input type="checkbox"/> \$82	<input type="checkbox"/> \$144	
Mounts Bay Waters Apartment Hotel 1 Bedroom Apartment		<input type="checkbox"/> \$213	
2 Bedroom & 1 bath		<input type="checkbox"/> \$268	
Mountway Hotel Apartments	<input type="checkbox"/> \$47.50	<input type="checkbox"/> \$95	

IF YOU SELECT TWIN SHARE, PLEASE NAME PERSON SHARING WITH YOU FAMILY NAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_

#### NIGHTS STAYING

- THURSDAY 26 JUNE 2008  
 FRIDAY 27 JUNE 2008  
 SATURDAY 28 JUNE 2008  
 SUNDAY 29 JUNE 2008  
 Additional nights \_\_\_\_\_

COST (\$)
   
x
   
No. DAYS
   
\$ \_\_\_\_\_

**TOTAL \$**

My special dietary requirements are

**P O B o x 4 1 4 G r e e n w o o d 6 9 2 4**

NOTE: DELEGATES AND SPONSORS MAY BE GIVEN A LIST OF ALL DELEGATES (NAME AND SCHOOL/ORGANISATION ONLY). RECEIPT OF YOUR REGISTRATION FORM WILL SIGNAL YOUR ACCEPTANCE OF THIS. PLEASE CONTACT EVENTS WA SHOULD THIS NOT MEET YOUR APPROVAL.

**This form, once completed, becomes your Tax Invoice - please copy for your records**