



2018 WIOA - NSW EXHIBITION REGISTRATION FORM

OFFICE USE ONLY

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WIOA Terms and Conditions and Cancellation Policy for Exhibitors
 I have read and agree to the WIOA Terms and Conditions and Cancellation Policy for Exhibitors as set out on page 4 of the exhibition prospectus and on the WIOA website.

Name: Position:
 Signature: Date: / /

COMPANY

Organisation/Company Name:
(for invoicing purposes)

Company Name:
(for marketing purposes)

CONTACT PERSON

First Name Surname
 Position
 Postal Address
 City State Postcode
 Phone Mobile
 Email

Designated contact person for all further information relating to the exhibition Same as above

First Name Surname
 Position
 Postal Address
 City State Postcode
 Phone Mobile
 Email

The information above will appear on an exhibitor list provided to delegates. Tick if you DO NOT want these details published:

PREFERRED SITE NO. (see Floorplan): 1st 2nd 3rd 4th 5th 6th

Exhibition Site/s	<input type="text"/>	QTY	@	(insert price for selected site/s)	\$	_____
Meals Package	<input type="text"/>		@	\$264.00 (inc 10% GST) per person	\$	_____
Lunch Only	Wed <input type="text"/>	Thurs <input type="text"/>	@	\$ 33.00 (inc 10% GST) per person per day	\$	_____
Dinner Only	Wed <input type="text"/>	Thurs <input type="text"/>	@	\$ 99.00 (inc 10% GST) per person per day	\$	_____

I would like information on sponsorship opportunities during the conference. YES NO

TOTAL \$ _____

DON'T SEND ANY MONEY NOW

Please forward this registration form to **Ann Austin** by **Email** ann@wioa.org.au, or **Fax** 03 5821 6033
 A Tax Invoice will be issued upon receipt of the registration form and allocation of the site.
 It is a requirement of all companies reserving a site to **read the WIOA Terms and Conditions and Cancellation Policy for Exhibitors**.
 To confirm your site, payment in full must be received by **2 February 2017** or the site WILL be re-allocated.