**REGISTRATION FORM**

**GP Education Day**

**Paediatric Nutrition**

**Wednesday 9th February 2022**

**Name:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Address:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Telephone:**

**Work:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Mobile:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Email:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Current Position:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Workplace:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Work experience:**

🞎 Trainee 🞎 < 1year 🞎 1-5 years 🞎 5-10 years 🞎 >10 years

**Place of Work:**

🞎 metropolitan area 🞎 rural area

Other (please give details) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TAX INVOICE / PAYMENT OPTIONS ABN: 3565570546

*Early Bird Registration (Monday 17th January 2022)* $280 (Includes GST)

*Standard Registration (after Monday 17th January 2022)* $300 (Includes GST)

***Please note credit card payments will incur a 1.5% surcharge***

🞎 Pay by Cheque: Please make payable to “Royal Children’s Hospital”

🞎 Pay by Credit Card: Please complete details below:

#### Card Type: 🞎 Visa 🞎 Mastercard Amount: $\_\_\_\_\_\_\_\_\_\_\_\_

## Card Number: - - - - / - - - - / - - - - / - - - -

Expiry Date: - - / - -

Name: (as it appears on card) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PLEASE NOTE:**

Cancellations up to 7 days prior to the event date will incur an administration fee of $50.

No refunds will be given for cancellations made less than 7 days prior to the event date.

A nominated substitute may attend.

**Send to:**

Mary McPherson & Katie O’Brien (please cc both in)

Email:

mary.mcpherson@rch.org.au

katie.o'brien@rch.org.au