



# Association of Children's Welfare Agencies Conference 2010

Building a Child Friendly Australia:  
Responding to Vulnerable Families

[www.acwa2010.com](http://www.acwa2010.com)

Sydney Convention and Exhibition Centre, Darling Harbour

## REGISTRATION FORM

Online registration is preferred. Please visit our secure website [www.acwa2010.com](http://www.acwa2010.com) to register and book your accommodation. Please note that all online registration require immediate credit card payment.

Please print clearly or type and keep a photocopy of this form for your records. The information submitted will be reproduced in the delegate list at the conference and be used for all mailings. Please ensure the information you complete is correct.

Please complete the form and mail immediately with your cheque payable to ACWA 2010.

Forward this form and payment to:

The Conference Managers  
ACWA 2010  
GPO Box 128  
SYDNEY NSW 2001  
AUSTRALIA

### A. DELEGATE REGISTRATION

Delegate

Title (Please Tick)	<input type="checkbox"/> Mr			<input type="checkbox"/> Mrs			<input type="checkbox"/> Ms			<input type="checkbox"/> Miss			<input type="checkbox"/> Dr			<input type="checkbox"/> Prof			<input type="checkbox"/> Other:		
Family Name																					
Given Name																					
Organisation/Association																					
Position																					
Street Address																					
City/Suburb							State														
Country							Postcode / Zip														
Telephone							Mobile Phone														
Fax																					
Email (2 Addresses Preferred)																					
Preferred Name on name badge																					

### B. REGISTRATION FEES

NOTE: All fees include the 10% Goods and Services Tax (GST).

Category	Early Bird <i>Before 13 May 2010</i>	Standard <i>From 14 May 2010</i>	Total
Full Delegate Registration (3 days)	<input type="checkbox"/> A\$730	<input type="checkbox"/> A\$865	\$
Two Day Registration	<input type="checkbox"/> A\$670	<input type="checkbox"/> A\$795	\$
One Day Registration	<input type="checkbox"/> A\$370	<input type="checkbox"/> A\$435	\$
Student	<input type="checkbox"/> A\$500	<input type="checkbox"/> A\$500	S

If you are registering for a day, please tick which day you will be attending:  Monday  Tuesday  Wednesday

If student registration:  I have included copy of my student identification card

Please note: Confirmation of your registration will be sent to you within 10 working days from receipt of your registration form.

B. Sub-Total Registration Fee: A\$

## C. ACCOMMODATION

- A minimum one night's deposit must be paid or credit card details given at time of booking to guarantee reservation.
- Deposit is non-refundable at 30 June 2010.
- Bookings made after 30 June 2010 must be secured with credit card details.
- Cancellations must be notified in writing to the Conference Managers.

### Hotel and Deposit Requirements

Star Rating	Distance to Conference Venue	Hotel	Room Type	Room Only Rate <i>incl. GST</i>	Bed and Breakfast Rate SGL <i>Incl. GST</i>	Bed and Breakfast Rate DBL/TWN <i>Incl. GST</i>
4.5	3 minutes	Novotel Sydney On Darling Harbour	Harbour View Room SGL/DBL	A \$269	A\$289	A\$309
			Harbour View Room TWN	A\$269	NA	A\$309
			Prymont View Room SGL/DBL	A\$239	A\$259	A\$279
			Prymont View Room TWN	A\$239	NA	A\$279
4.5	3 minutes	Oaks Goldsbrough Apartments Darling Harbour	Two Bedroom Apartment	A\$326	NA	NA
			One Bedroom Apartment	A\$185	NA	NA
			Studio Room SGL/DBL/TWN	A\$165	NA	NA
3.5	2 minutes	Hotel Ibis Darling Harbour	Harbour View Room SGL/DBL	A\$189	A\$204	A\$219
			Harbour View Room TWN	A\$189	NA	A\$219
			Prymont View Room SGL/DBL	A\$159	A\$174	A\$189
			Prymont View Room TWN	A\$159	NA	A\$189

Please indicate below whether you wish to pay for your entire stay:

- Yes, I wish to pay for my entire stay now  
 No, I only wish to pay the one night's deposit now

#### Hotel Room Requirements

- Single    Twin    Double

#### Apartment Room Requirements

- 1 Bedroom Apartment (1 double bed)  
 2 Bedroom Apartment (1 double and 2 single beds)

If your first preference of hotel, as indicated above, is not available, the Conference Managers will secure your accommodation at another hotel. Please indicate your second preference:

#### Second preference

### C. ACCOMMODATION *(continuing)*

I do not require the Conference Managers to book accommodation for me. I have made my own arrangements.

I will be staying at:  *(name of hotel)*

With friends or family

**Important - Please complete this section**

Arrival/Check in Date	<input type="text" value="d"/> <input type="text" value="d"/> <input type="text" value="m"/> <input type="text" value="m"/> <input type="text" value="y"/> <input type="text" value="y"/>	Estimated Time of Arrival	<input type="text"/>
Departure/Check out Date	<input type="text" value="d"/> <input type="text" value="d"/> <input type="text" value="m"/> <input type="text" value="m"/> <input type="text" value="y"/> <input type="text" value="y"/>	Estimated Time of Departure	<input type="text"/>

I wish to guarantee early check in by pre-booking and paying for the previous night on

I will be sharing this room with

Special Requirements e.g. smoking/ non smoking room (subject to availability)

**C. Sub-Total Accommodation: A\$**

### D. SOCIAL PROGRAM

NOTE: All fees include the 10% Goods and Services Tax (GST).  
 The following events are optional and not included in the Registration Fee for Delegates and Accompanying Persons. If you require tickets for these events please complete this section

Event	Cost per ticket	Number of tickets required	Total Cost
Welcome Reception	A\$80	<input type="text"/>	<input type="text"/>
Conference Dinner	A\$110	<input type="text"/>	<input type="text"/>

**D. Sub-Total Additional / Optional Social Tickets: A\$**

### E. SPECIAL NEEDS / DIETARY REQUIREMENTS

If you have any special needs please specify. Every attempt will be made to meet your requirements, however this may not be possible in every case.

