



The Pharmacy
Guild of Australia

APP2015

12-15 March

Gold Coast Convention & Exhibition Centre, Queensland



PHARMACY ASSISTANTS @ APP2015 REGISTRATION FORM

TO REGISTER MORE STAFF PLEASE PHOTOCOPY THIS FORM

Pharmacy Details

Pharmacy Name _____

Address _____ State _____ Postcode _____

Phone _____ Email _____

Special Requirements (*dietary, etc*) _____

Pharmacy Assistant/s Details

PHARMACY ASSISTANT 1

Name _____

Job title/position _____

Please register me for:

- | | |
|--------------------------------------------------------------------------|-----------------|
| <input type="checkbox"/> Option 1 - Friday to Sunday (Inc Street Party) | \$185.00 |
| <input type="checkbox"/> Option 2 - Friday to Sunday (Ex Street Party) | \$100.00 |
| <input type="checkbox"/> Option 3 - Saturday & Sunday (Inc Street Party) | \$185.00 |
| <input type="checkbox"/> Option 4 - Saturday & Sunday (Ex Street Party) | \$100.00 |
| <input type="checkbox"/> Option 5 - Sunday only | \$100.00 |
| <input type="checkbox"/> Option 6 - Welcome Reception only | FREE |
| <input type="checkbox"/> Option 7 - Welcome Reception & Trade Exhibition | FREE |

PHARMACY ASSISTANT 2

Name _____

Job title/position _____

Please register me for:

- | | |
|--------------------------------------------------------------------------|-----------------|
| <input type="checkbox"/> Option 1 - Friday to Sunday (Inc Street Party) | \$185.00 |
| <input type="checkbox"/> Option 2 - Friday to Sunday (Ex Street Party) | \$100.00 |
| <input type="checkbox"/> Option 3 - Saturday & Sunday (Inc Street Party) | \$185.00 |
| <input type="checkbox"/> Option 4 - Saturday & Sunday (Ex Street Party) | \$100.00 |
| <input type="checkbox"/> Option 5 - Sunday only | \$100.00 |
| <input type="checkbox"/> Option 6 - Welcome Reception only | FREE |
| <input type="checkbox"/> Option 7 - Welcome Reception & Trade Exhibition | FREE |

PHARMACY ASSISTANT 3

Name _____

Job title/position _____

Please register me for:

- | | |
|--------------------------------------------------------------------------|-----------------|
| <input type="checkbox"/> Option 1 - Friday to Sunday (Inc Street Party) | \$185.00 |
| <input type="checkbox"/> Option 2 - Friday to Sunday (Ex Street Party) | \$100.00 |
| <input type="checkbox"/> Option 3 - Saturday & Sunday (Inc Street Party) | \$185.00 |
| <input type="checkbox"/> Option 4 - Saturday & Sunday (Ex Street Party) | \$100.00 |
| <input type="checkbox"/> Option 5 - Sunday only | \$100.00 |
| <input type="checkbox"/> Option 6 - Welcome Reception only | FREE |
| <input type="checkbox"/> Option 7 - Welcome Reception & Trade Exhibition | FREE |

PHARMACY ASSISTANT 4

Name _____

Job title/position _____

Please register me for:

- | | |
|--------------------------------------------------------------------------|-----------------|
| <input type="checkbox"/> Option 1 - Friday to Sunday (Inc Street Party) | \$185.00 |
| <input type="checkbox"/> Option 2 - Friday to Sunday (Ex Street Party) | \$100.00 |
| <input type="checkbox"/> Option 3 - Saturday & Sunday (Inc Street Party) | \$185.00 |
| <input type="checkbox"/> Option 4 - Saturday & Sunday (Ex Street Party) | \$100.00 |
| <input type="checkbox"/> Option 5 - Sunday only | \$100.00 |
| <input type="checkbox"/> Option 6 - Welcome Reception only | FREE |
| <input type="checkbox"/> Option 7 - Welcome Reception & Trade Exhibition | FREE |

Payment Details

TOTAL PAYMENT \$ _____

Credit card (please circle): Mastercard / Visa / Amex / Diners

Card Number _____ Name of Cardholder _____

Expiry date _____ CVC _____ Signature _____

Return return this form to:

The Pharmacy Guild of Australia, Queensland Branch, PO Box 457, Spring Hill Qld 4004

Fax: 07 3831 9246 **Email:** events@qldguild.org.au