

Sport and the Pacific Region: Cross-Cultural Currents II

16-18 September 2009, University of the South Pacific – Cook Islands Campus

PAYMENT OPTION FORM - TAX INVOICE

Name (to appear on delegate tag):			
Organisation/Institution:			
Postal Address:			
Email Address:			
Can your contact details be published in the delegate information pack?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	

Please tick the box corresponding to your selection and write the subtotal and total amounts in the right hand column. The Registration Fee includes a reception on Monday evening, morning tea, lunch and afternoon tea on Tuesday, and morning tea on Wednesday. **NB. This Payment Option Form is for international delegates only. Local delegates (Pacific Islands, excluding New Zealand) should contact Andrew Minogue at pacificgamescouncil@nc2011.nc directly in order to arrange their registration for the conference.**

Registration Options	Subtotal
<input type="checkbox"/> \$125 Early Bird Full: payment prior to 28 August	\$ _____
<input type="checkbox"/> \$100 Early Bird Concession: payment prior to 28 August, full-time students or unwaged – photocopied/scanned evidence must be provided with the payment option form	\$ _____
<input type="checkbox"/> \$150 Late Full: payment received after 28 August	\$ _____
<input type="checkbox"/> \$125 Late Concession: payment received after 28 August, full-time students or unwaged – photocopied/scanned evidence must be provided with the payment option form	\$ _____
<input type="checkbox"/> \$50 Conference Dinner (No concessions)	\$ _____
<input type="checkbox"/> \$50 Conference Dinner – Additional Person (No concessions)	\$ _____

Victoria University ABN 83776954731 (all costs include GST)

Total Cost (Australian dollars) \$ _____

Payment Details (please make sure you enter the total amount for either cheque or credit card)

- I enclose a cheque for \$ _____ made payable to 'Victoria University' **OR**
- Please debit my credit card (tick appropriate box) Visa Bankcard Mastercard

Card No: _ _ _ _ - _ _ _ _ - _ _ _ _ - _ _ _ _

Expiry Date: _ _ / _ _

Card Holder Name: _____

Card Holder Signature: _____

Total Amount: (Australian dollars) \$ _____

Please post or email a scanned copy of this form to:

Dr Rob Hess
School of Sport and Exercise Science
Victoria University
PO Box 14428
Melbourne, Victoria, Australia, 8001
Email: Robert.Hess@vu.edu.au

Please Note: Payment can be made by either cheque or credit card, but for overseas delegates the cheque must be a bank cheque or money order in Australian dollars (personal cheques from overseas delegates will not be accepted).