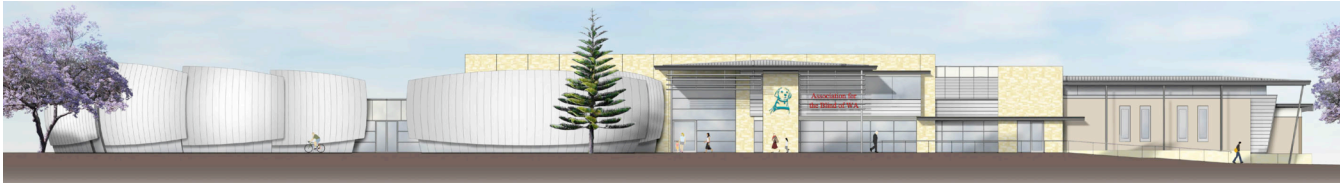


INFORMATION TECHNOLOGY ACCESSIBILITY WORKSHOP



ASSOCIATION FOR THE BLIND OF WESTERN AUSTRALIA

REGISTRATION FORM

Surname	
First name	
Name for name tag	
Title	
Organisation	
Postal Address	
State	
Postcode	
Telephone	
Email	
Special dietary requirements	
Alternative format required	

Workshop costs:

Registration includes morning/afternoon tea and lunch, and a Resource CD-ROM (GST inclusive).

Registration	Cost	My registration
Full registration Early Bird	\$500	
Full registration	\$600	
Group registration, 5 or more from an organisation. Number attending _____ <i>Please complete duplicate forms for information on each attendee.</i>	\$400pp	
TOTAL AMOUNT		\$ _____

Please debit the total amount above to my credit card below:

Bankcard Mastercard Visa Other _____

 Expiry date:

Signature _____

OR Attached is my cheque for \$ _____

Please make cheques payable to Association for the Blind of Western Australia. Upon registration you will receive acknowledgment in writing and a tax invoice.