

Perspectives on Accountability

Eleventh Annual Public Law Weekend
3 - 4 November 2006



Visions Theatre, National Museum of Australia, Lawson Crescent, Acton Peninsula, Canberra

REGISTRATION

(Tax invoice*) ABN 52234063906

Please register by Friday 27 October 2006. Earlybird registration by Friday 20 October 2006.

Name: _____ Organisation: _____

Mailing Address: _____

Tel: _____ Email: _____

Special Dietary Requirements: _____

REGISTRATION (Does not include Friday night dinner)

Government/Professional rate \$450
Government/Professional early bird rate \$420
Academic rate \$280
Academic early bird rate \$250

FULL-TIME STUDENT REGISTRATION (Does not include Friday night dinner)

Student rate \$100
Student no: _____

PART REGISTRATION (Does not include Friday night dinner)

Friday afternoon only

Government/Professional rate \$225
Academic rate \$140
Student rate \$50
Student no: _____

Saturday morning only

Government/Professional rate \$225
Academic rate \$140
Student rate \$50
Student no: _____
I will stay on for lunch yes no

Saturday afternoon only

Government/Professional rate \$225
Academic rate \$140
Student rate \$50
Student no: _____
I will arrive in time for lunch yes no

DINNER Friday 3 November

Conference Dinner at The Deck at Regatta Point, Barrine Drive, PARKES, Canberra

I will attend the Friday night dinner yes no \$80

I will bring a guest yes no \$80

Guest's name: _____

Guest's dietary requirements: _____

TOTAL \$ _____

PAYMENT OPTIONS

*This form will become a tax invoice once payment has been made by cheque/money order or credit card. A receipt for your payment will be provided. All fees are GST inclusive. A tax Invoice will only be raised for Electronic Funds Transfer (EFT) payments.

Cheque/Money Order (Please make payable to: The Australian National University)

Credit Card Type: Bankcard Mastercard Visa

(Amex and Diners not accepted)

Credit Card number: Name of cardholder: _____ Expiry date: ___ / ___ / ___

Address of cardholder: _____

Signature: _____ Date: ___ / ___ / ___

Electronic Funds Transfer (EFT)

(A Tax Invoice will be raised)

Name: _____ Organisation: _____

Mailing Address: _____

Tel: _____ Fax: _____

Please return this form by **27 October** at the latest to:

PLW Conference Secretariat
CIPL, ANU College of Law
ANU, CANBERRA ACT 0200

TEL: (02) 6125 0454
FAX: (02) 6125 0150
EMAIL: cipl@law.anu.edu.au