**ANZTCA 2017 Conference Registration Form**

**University of Waikato, Hamilton
20-23rd November, 2017**

**Personal Details**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Campus / Institution: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

mobile number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dietary Needs: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other Health Needs: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact (name & number): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **Please email the completed registration form to Andrew McKean ::** mckeanan@waikato.ac.nz

**Registration Details**

**Full conference:**
Monday–Thursday, includes all accommodation & meals:

Earlybird (registered and paid before Oct 31st): $400 [ ]
Lateybird: (registered and paid after Oct 31st): $440 [ ]

**Single Day(s)**
We have a day rate of $70. This covers the conference sessions and meals, but not accommodation. Perfect if you wish to be with us for a single day, or multiple days but will be staying with friends or family locally.

I wish to register at the day rate for the following day(s):

MONDAY $70 [ ]
TUESDAY $70 [ ]
WEDNESDAY $70 [ ]
THURSDAY $70 [ ]

Total to pay: \_\_\_

**Conference Contact Details**:

Andrew McKean (Waikato University): mckeanan@waikato.ac.nz 0212976726

Mark Day (Wintec): mark.day@wintec.ac.nz 0220805323

**Payment Details** – please make full payment to:

ANZ Account: **06-0169-0687995-46**
Account name: **Rev A N MCKEAN and Dr T S NACHOWITZ**

Please use your surname and campus / institution as reference.

**Travel Plans**

Please indicate if you would like transport from the Airport or Bus Station.

**Yes** please! – I’d like a ride. I will let you know my arrival times once tickets are booked. [ ]

**No** thanks – Ruggedly independent as I am, I will find my own way to the University. [ ]

Please indicate flight times here (if you know them):

Arrival: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Departure: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If you don’t know flight times yet, let us know when you do, and we will contact you.