

Registration form *Going the distance: planning for sustainability*

17 September 2010. Eden killer Whale Museum, 184 Imlay Street, Eden NSW 2551

Email completed form to ashab@mgnsw.org.au, or fax to (02) 9358 1852, or post to 43-51 Cowper Wharf Rd, Woolloomooloo 2011

Workshop Fee (Please select the appropriate category)

\$55 full price

\$45 concession (Students, pensioners, museum/gallery volunteers)

Special prices

Museums & Galleries NSW is offering a special deal to eligible parties. Individuals working at volunteer run museums, or organisations which have or will participate in the M&G NSW Standards Program, are invited to register 3 people for \$100. Please note that the personal details for each person registering must be completed below.

Volunteer museums deal: register three delegates for \$100

Free 2010 Standards briefing session (invited guests only)

This is a complimentary session which is aimed at prospective participants in the 2011 Standards Program which will be held in the South East region

Please tell us where you heard about *Planning for sustainability*?

M&G NSW e-bulletin *Alert!* M&G NSW website M&G NSW printed promotion Other website

Word of mouth Other (please specify) _____

Main contact Complete the following information for each person registering

Surname

Given name(s)

Position

Organisation

P/C

Address

Phone

Fax

Email

Statistical Information (please tick the appropriate responses)

Age	Gender	Region	Extra
15 - 25 <input type="checkbox"/>	Male <input type="checkbox"/>	Metro Sydney <input type="checkbox"/>	Disability/special needs <input type="checkbox"/>
26- 40 <input type="checkbox"/>	Female <input type="checkbox"/>	Western Sydney <input type="checkbox"/>	Non-English speaking background <input type="checkbox"/>
41- 64 <input type="checkbox"/>		Regional NSW <input type="checkbox"/>	Aboriginal or Torres Strait Islander <input type="checkbox"/>
65+ <input type="checkbox"/>		Other <input type="checkbox"/>	

Second contact Ms/Mrs/Mr/Dr (please circle)

Surname

Given name(s)

Position

Organisation

Organisation address

Phone

Fax

P/C

Email

Statistical Information (please tick the appropriate responses)

Age	Gender	Region	Extra
15 - 25 <input type="checkbox"/>	Male <input type="checkbox"/>	Metro Sydney <input type="checkbox"/>	Disability/special needs <input type="checkbox"/>
26- 40 <input type="checkbox"/>	Female <input type="checkbox"/>	Western Sydney <input type="checkbox"/>	Non-English speaking background <input type="checkbox"/>
41- 64 <input type="checkbox"/>		Regional NSW <input type="checkbox"/>	Aboriginal or Torres Strait Islander <input type="checkbox"/>
65+ <input type="checkbox"/>		Other <input type="checkbox"/>	

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65+ <input type="checkbox"/>		Other <input type="checkbox"/>	

Payment DetailsVisa MasterCard Cheque Invoice

Cardholder _____ Card Number _____ Expiry _____

Signature _____