

Registration Form

A Separate Form Is Required For Each Delegate

Section Meetings Please tick your preference

To enable suitable areas to be set aside for section meetings, we ask that you please indicate your preference below for attendance:

LOGGING RURAL

BULK/LINEHAUL PORTS/TOWN

Partner Registration

SURNAME Title (Mr/Mrs/Ms/Miss)

FIRST NAME

(Preferred First Name For Badge)

Email *(Please complete so we can update you!)*

Partners Programme Please tick your preference

TICK IF YOU WISH TO BE INCLUDED IN THE PARTNERS PROGRAMME ON SATURDAY 18th Sept.

Arrowtown/Gibbston Valley wine/cheese Tour with lunch

TICK IF YOU WISH TO BE INCLUDED IN THE PARTNERS PROGRAMME ON SUNDAY 19th Sept.

Devonshire Tea & Guest Speaker

Skyline lunch & Guest Speaker

Golf

ARROWTOWN GOLF COURSE –
11.00am Monday 20th September

Number of golfers
\$60.00 per player includes transport, green fees and afternoon tea

Delegate Registration

SURNAME TITLE (Mr/Mrs/Ms/Miss)

FIRST NAME *(Preferred First Name For Badge)*

FULL POSTAL ADDRESS

COMPANY

EMAIL

TELEPHONE FAX

Special requirements (E.g. Diet, Wheelchair access etc.)

TAX INVOICE GST # 61 589 228

Please complete this form, **make a copy for your records** and forward it to:



RTFNZ Conference 2010
C/ Events 'R' Us Ltd.
PO Box 167
Queenstown
Facsimile 03 442 1211

*Completed registration forms must be accompanied by payment.
Please make all cheques payable to RTFNZ CONFERENCE 2010
Please note that the Standard registration fee only applies until Saturday 7 August 2010*

