



REGISTRATION FORM FOR DELEGATES

Please PRINT or TYPE in block letters and send to:

ILDS 2003
Australian Library and Information Association
PO Box E441
Kingston, 2604, ACT
Australia

Fax: +61-2-6282-2249

Please tick ✓ applicable boxes on the form.

A. Personal details

Title: Given name:..... Family name:

Organisation:

Job title:

Postal address:

Postal code:..... Country:

Telephone number: Fax Number:.....

Email:.....

Preferred name on badge:

Please tell us of any special dietary requirements:.....

Please tell us of any other special requirements:

.....

B. Events

Please indicate if you plan to attend the following events.

	Event	Fee
<input type="checkbox"/>	Monday 27 October – City of Canberra welcome	Included in registration fee
<input type="checkbox"/>	Tuesday 28 October – Conference Welcome reception	Included in registration fee
<input type="checkbox"/>	Wednesday 29 October – Conference dinner	Included in registration fee
<input type="checkbox"/>	Thursday 30 October – Great Outdoor Entertainment evening	Included in registration fee
<input type="checkbox"/>	Friday 31 October – Library tour visits	Included in registration fee
<input type="checkbox"/>	Saturday 1 November – Excursion to beaches and bush (adequate numbers are needed for the tour)	AUD\$150 (to be paid with registration fee)

C. Delegates list

I agree to my name, organisation and email address being on the delegates list which will be given to all delegates.

