



# The Australasian College of Cosmetic Surgery

*Raising Standards, Protecting Patients*

## ACCS Liposuction Workshops – 2019 Sydney

- Basic Liposuction Workshop 1 – 27<sup>th</sup> to 28<sup>th</sup> July 2019
- Advanced Liposuction Workshop 2 – 24<sup>th</sup> to 25<sup>th</sup> August 2019

### APPLICATION FORM

**Surgical experience required, with details to be provided via CV.**

Please complete this form, attach CV and medical indemnity insurance certificate of currency.

#### PARTICIPANT INFORMATION

Date of application: \_\_\_\_\_

Name: Dr

.....  
Last

.....  
First

Address: .....

Indemnity Insurer: (please attach copy)

Policy Number: .....

**Insurance policy must cover liposuction procedures.**

Contact Information:

.....  
Mobile

.....  
Email

I wish to attend: (please tick)

- |   |                     |   |                     |
|---|---------------------|---|---------------------|
| <input type="checkbox"/> Basic Workshop ( <i>Hands-on</i> )     | \$8,800.00 incl gst | <input type="checkbox"/> Advance Workshop ( <i>Hands-on</i> )     | \$8,800.00 incl gst |
| <input type="checkbox"/> Basic Workshop ( <i>Observe only</i> ) | \$5,000.00 incl gst | <input type="checkbox"/> Advance Workshop ( <i>Observe only</i> ) | \$5,000.00 incl gst |

Register for both Basic & Advanced Workshop receive 10% discount.

- |  |   |  |  |
|--|---|--|--|
| <input type="checkbox"/> Basic & Advanced Workshop ( <i>Hands-on</i> ) | \$16,000.00 incl gst (including discount) | <input type="checkbox"/> Basic & Advanced Workshop ( <i>Observation only</i> ) | \$9,000.00 incl gst (including discount) |
| <i>10% discount offered</i>  |   | <i>10% discount offered</i>  |  |

Surgical Registrars and Medical Registrars approved to undertake Module 4 of the program are entitled to complimentary registration.

**To register**, please email or fax form to: [admin@accs.org.au](mailto:admin@accs.org.au) Fax: (02) 9687 1799 – attach CV and insurance

**Payment Details:** Payment is required at time of registration. No payments/registrations taken on the day.

<input type="checkbox"/> EFT  Once approved for workshop(s) and invoice received.  Westpac Banking Corp BSB: 032-021, Acc: 134477 <i>Please advise invoice number and surname with remittance</i>	<input type="checkbox"/> Cheque  Payable to: Australasian College of Cosmetic Surgery Post to: ACCS PO Box 36 Parramatta NSW 2124	<input type="checkbox"/> Credit Card <i>By phone: 1800 804 781 (free call) or fill in form below.</i>  Mastercard/Visa/Amex/Diners (please circle)  Card Number: _____ Expiry Date: _____  Name on Card: _____  Signature of Cardholder: _____
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