



The Australasian College of Cosmetic Surgery

Raising Standards, Protecting Patients

ACCS Liposculpture 1 & 2 Workshop - Neutral Bay NSW
13-15 March 2009 & 2-4 May 2009

REGISTRATION FORM

PARTICIPANT INFORMATION

DATE OF APPLICATION: _____

Name:

_____ Last

_____ First

Address: _____

Alternate Address: _____

Contact Information:

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_____ Telephone

_____ Mobile

Email _____

Please tick box if you are a Registrar of the ACCS **NB: No payment required for ACCS Registrars**

3-Day Workshop 1 \$5,000

3-Day Workshop 2 \$5,000

3-Day Workshop 1 & 2 \$9,000

Observation Only Workshop 1 \$2,500

Observation Only Workshop 2 \$2,500

Observation Only Workshop 1 & 2 \$4,500

Post or Fax Form to:

Australasian College of Cosmetic Surgery
PO Box 36 Parramatta NSW 2124
Fax: (02) 9687 1799

Payment Details:

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

Cheque

Payable to Australasian College of Cosmetic Surgery

Credit Card

Mastercard/Visa/Amex/Diners (please circle)

By phone:

1800 804 781 (free call)

Card Number: _____ Expiry Date: _____

Name on Card: _____

Signature of cardholder: _____

Office Use Only: Payment Confirmed: Yes /No Receipt # _____ Date: _____