



Booking form and tax invoice

To secure a place please complete and return this form to:

Fax: 03 9614 2550

Mail: Level 2, 405 Collins Street, Melbourne, 3000

Event: 2009 Arts and Public Life Breakfast

Date: Tuesday 30 March 2010 Time: 7.15am for 7.30am

Venue: Sofitel Melbourne, 25 Collins Street Melbourne

Attendee:

Title (Mr/Ms) _____ First name: _____ Surname: _____

Company: _____

Address: _____

Suburb: _____ State: _____ Postcode: _____

Phone: _____ Mobile: _____

Email: _____

Breakfast will be provided –please inform us of any dietary requirements

Tables of 10 are available for \$400. Please include name and company of all guests.

This form is a Tax Invoice when completed and payment is made. ABN: 88 072 479 835

Payment Method

Visa Mastercard American Express

Cheque (made payable to AbaF and posted with registration form)

Payment total \$40 including GST for each guest

Total payment: _____

Card number: _____

Expiry date: _____

Cardholder name: _____

Cardholder signature: _____