

Company Details

Company Name: _____

Postal Address: _____ P/Code: _____

Phone: _____ Fax: _____

Contact Person: _____ Email: _____

Tradeshow Programme

- Monday, 28th July 2008 – 10am to 4.30pm**
Park, Skyline & River Rooms
Melbourne Park Function Centre (Melbourne VIC)
- Wednesday, 30th July 2008 – 10am to 4.30pm**
Exhibition Hall
Australian Technology Park (Sydney NSW)
- Friday, 1st August 2008 – 10am to 4.30pm**
Colin Meagher Pavillion
Parklands Gold Coast (Gold Coast QLD)

Show Attending

(please tick - non-exhibiting suppliers only)

Melbourne Sydney Gold Coast

Attendee Names (for non-exhibiting suppliers)

1. _____

2. _____

3. _____

4. _____

(please attach a separate sheet if necessary)

Social Functions

Monday, 28th July 2008 – 5pm to 8pm
Opening Night Cocktail Party
Yarra Room - Melbourne Park Function Centre
Melbourne VIC
Cost - \$75.00 per head
Please book - _____ tickets @ \$75.00 each

Wednesday, 30th July 2008 – 5pm to 7pm
Education Sessions on Artwork & Graphics and Business Coaching
Meeting Room 6B - Australian Technology Park
Sydney NSW
Cost - FREE (limited space)
Please book - _____ complimentary passes

Friday, 1st August 2008 – 7pm (doors open at 6.15pm)
Australian Outback Spectacular Show
(includes dinner & drinks)
Warner Village Theme Park
Gold Coast QLD
Cost - \$95 per head
Please book - _____ tickets @ \$95.00 each

Payment Options:

Please find enclosed a cheque made payable to APPA for \$ _____

Please charge \$ _____ on my credit card* as follows
 Visa Mastercard Bankcard Diners AMEX (please circle)
 Card Number: _____ / _____ / _____ / _____
 Expiry Date: _____ / _____ Signature: _____
 * All Credit Card Transactions will attract a processing fee

I have deposited \$ _____ into the Bank Account
 Account Name - APPA BSB - 063141 Account No - 1021 7210

Return Form to:

APPA Secretariat
 PO Box 5161
 Alphington VIC 3078
 Tel: 03 9499 5544
 Fax: 03 9499 8851
 Email: info@appa.com.au