



# GALA DINNER REGISTRATION showcase09

AWARDS FOR EXCELLENCE IN SCHOOLS

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**Bookings close**  
**Thursday 22 October 2009**

**PERSONAL DETAILS**

Title	First name	Surname
<hr/>		
Position		
<hr/>		
Organisation		
<hr/>		
Postal address		
<hr/>		
State	Postcode	
<hr/>		
Phone	Facsimile	
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Email		
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**Seating** – If you wish to be seated with a particular party, please specify their booking name.  
Changes to seating arrangements can not be accepted less than three days prior to the dinner.

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**Other needs** – Please provide other requirements e.g. dietary, medical or wheelchair access needs.

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Please provide full names of your guests to enable us to complete the table allocations.

**Full name of guests – Table 1**

1. _____	6. _____
2. _____	7. _____
3. _____	8. _____
4. _____	9. _____
5. _____	10. _____

**Full name of guests – Table 2**

1. _____	6. _____
2. _____	7. _____
3. _____	8. _____
4. _____	9. _____
5. _____	10. _____

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**Tickets**

\_\_\_\_\_ ticket/s at \$90 per person (incl. GST) Total \$ \_\_\_\_\_

\_\_\_\_\_ tables of 10 at \$900 (incl. GST) Total \$ \_\_\_\_\_

 I require a tax invoice **Payment Method 1**       **I require a receipt**

(Please note that payments made via cheque, money order and credit card will not be issued with a receipt, unless requested)

 **Cheque** (Payable to Department of Education and Training. Post together with a copy of this form) **Money Order** (Payable to Department of Education and Training. Send together with a copy of this form)

Registrations will be processed once payment made by cheque or money order has been received.

 Please debit my card with the amount owing on this form Visa       MasterCard

Expiry date \_\_\_\_ / \_\_\_\_

Card number \_\_\_\_\_

Card holder's name \_\_\_\_\_

Signature \_\_\_\_\_

 **Payment Method 2 – For Department of Education and Training units (excluding TAFE Institutes)**

Please provide the following details:

Cost centre \_\_\_\_\_ Internal order number \_\_\_\_\_

GL account \_\_\_\_\_ Approving officer's name \_\_\_\_\_

Signature \_\_\_\_\_

 **Payment Method 3 – For all schools and TAFE Institutes**

A tax invoice will be created based on information provided in the personal details section (overleaf).

 I have authorisation from my approving officer to purchase tickets**Please fax, email or post this form to:****Name** Raquel Gracey**Phone** 07 3237 1623      **Fax** 07 3836 0002**Email** raquel.gracey@deta.qld.gov.au**Post** Showcase Awards for Excellence in Schools 2009  
PO Box 15033, CITY EAST Q 4002**Regrettably, tickets cannot be refunded if cancelled less than 48 hours prior to the event.**