



GALA DINNER REGISTRATION
showcase 2010
 AWARDS FOR EXCELLENCE IN SCHOOLS

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Bookings close
Friday 15 October 2010

PERSONAL DETAILS

Title	First name	Surname
<hr/>		
Position		
<hr/>		
Organisation		
<hr/>		
Postal address		
<hr/>		
State	Postcode	
<hr/>		
Phone	Facsimile	
<hr/>		
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.

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

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

Full names of guests – Table 1

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

Full names of guests – Table 2

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

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Tickets

_____ ticket/s at \$95 per person (incl. GST) Total \$ _____

_____ tables of 10 at \$950 (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 2010
PO Box 15033, CITY EAST Q 4002

Regrettably, tickets cannot be refunded if cancelled less than 48 hours prior to the event.