

# Registration Application

NSW Community Services & Health ITAB

## 2010 Assessor Network

March 2, May 11, August 10, November 9

2 pm - 4:30 pm

Name of Organisation \_\_\_\_\_

Is your Organisation an ITAB member? Y / N (PLEASE CIRCLE)

Postal Address \_\_\_\_\_

Phone number \_\_\_\_\_ Email: \_\_\_\_\_

Name/s of Members Joining	Type of membership	
	Year or single session (PLEASE CIRCLE)	
_____	Yr	/ Single (indicate date)
_____	Yr	/ Single (indicate date)
_____	Yr	/ Single (indicate date)
_____	Yr	/ Single (indicate date)
_____	Yr	/ Single (indicate date)

Yearly membership: \$120 for ITAB members  
\$160 for non-members  
Or single session: \$45 for ITAB members  
\$65 for non members

NOTE: Cost is payable in advance and includes support materials, afternoon tea/wine and cheese.

TOTAL COST PAYABLE: \_\_\_\_\_

Please send application and payment (cheque or money order **only** payable to NSW Community Services and Health ITAB) to:

**NSW Community Services and Health ITAB, Attn: Kathy  
PO Box 562, Gladesville NSW 1675**