

## PMANZ Conference 2024 Registration Form

**1. Please type or print clearly.**

2. Forward completed form and payment to address below, or email [info@pmanz.nz](mailto:info@pmanz.nz) and pay by internet banking.
3. A cancellation fee of \$100 per delegate will apply, or your registration may be transferred to another person.
4. Invoices will be issued as confirmation of your registration.
5. Please retain a copy of this form for your records
6. Purchase orders will be accepted by way of confirmation.
7. Hotel accommodation is the responsibility of each delegate. Refer to Accommodation Guide under Conference 2024 on the PMANZ website: Click **Here**
8. The PMANZ council reserves the right to make changes to the published programme.
9. There will be an EARLY BIRD registration draw of a \$1000 Travel Voucher for one delegate – so register and pay before **30<sup>th</sup> June 2024** to go into the draw. There is an early bird rate for members.

| <b>PMANZ Members</b> (includes GST)                                 | <b>Non-PMANZ Members</b> (includes GST)                             |
|---|---|
| <b>Full Registration</b> (includes Thursday dinner) <b>\$340.00</b> | <b>Full Registration</b> (includes Thursday dinner) <b>\$460.00</b> |
| <b>Registration for Thursday</b> (incl. dinner) <b>\$300.00</b>     | <b>Registration for Thursday</b> (incl. dinner) <b>\$380.00</b>     |
| <b>Registration for Thursday only</b> <b>\$200.00</b>               | <b>Dinner</b> (for those not attending Thursday) <b>\$120.00</b>    |
| <b>Dinner</b> (for those not attending Thursday) <b>\$120.00</b>    | <b>Registration for Friday</b> <b>\$248.00</b>                      |
| <b>Registration for Friday</b> <b>\$165.00</b>                      |   |
| <b>Early Bird Registration</b> <b>\$315.00</b>                      |   |

**Delegate**  PMANZ Member  Non-Member

Title: \_\_\_\_\_ First Name: \_\_\_\_\_ Surname: \_\_\_\_\_

Name for ID Badge: \_\_\_\_\_

Address: \_\_\_\_\_

Tel: Bus: \_\_\_\_\_ Mob: \_\_\_\_\_

Email: \_\_\_\_\_

Privacy Act – I authorise the conference convener to disclose my name on the conference delegate list

**I wish to register for the following:**

- Full registration including Thursday dinner  \$ \_\_\_\_\_
- Thursday sessions only (includes dinner)  \$ \_\_\_\_\_
- Thursday sessions only  \$ \_\_\_\_\_
- Friday sessions only  \$ \_\_\_\_\_
- Guest for Thursday dinner (\$120.00)  \$ \_\_\_\_\_
- Name of guest \_\_\_\_\_ **Total \$** \_\_\_\_\_

Post or Email to:

**PMANZ**  
**P O Box 133215,**  
**Eastridge 1146,**  
**Auckland**

Phone 0800 476 269  
 Email: [info@pmanz.nz](mailto:info@pmanz.nz)

Direct Credit to Account:  
**02 0271 0185027 000**

**PAYMENT IS REQUIRED BY FRIDAY 28<sup>th</sup> JULY 2024**