

Science Teachers' Association of Victoria Inc.

ABN 59 004 145 329
Patron: Dr Barry Jones, AO, FAA, FAHA, FTSE, FASSA, FRSA, FRSN, FRSV, FACE

Science Victoria

ABN 94 108 759 762

OFFICE USE ONLY

Registration Number

STAVCON 2019 Registration Form

Friday 29 November 2019 La Trobe University, Bundoora

Personal detai	ls	To register o	nline go to:	nttp://scienc	evictoria.co	m.au/gatev	vay/stavcon.php	
School Purchase Order No. (ESSENTIAL		_) STAV Individual Membership No.						
Title	First name	First name			Surname			
School/Organi	sation							
Address								
Suburb				State		Postcode		
Mobile	Telephone			Fax				
Email Address	(ESSENTIAL)							
School Type: Government Independent			ent	Catholic		Other		
Region:	North Eastern	North Wes	stern	South Eastern		South Western Victoria		
School Level:	Early Years (P-4)	Middle Ye	ars (5-8)	5-8)				
Gender: Male/Female Dietary requirements: call STAV directly on 03 9385 3999								
Privacy state upcoming Please tick Session S Essential Se	atement: As part of this events. If you do not wish this box if you do not wish the celection Essions Use the codes in the pear at the beginning of	event STAV cor to be included sh to receive fu	mpiles a list of don this list urther inform	of participants olease tick this ation from Sci	s box.			
•	DICATE FOUR (4) PREFE							
Preferences			1st	2nd	3rd	4th		
Session A	10.35am – 11.20am	1	1					
Session B	11.25am – 12.10pm	1	2					
Session C	1.50pm – 2.35pm		3					
Session D	2.40pm – 3.25pm		4					
	n Greet Event Frida r catering purposes	y 3.30pm – <i>•</i>	4.00pm	Yes	6] No		

STAVCON 2019 Registration Form continued

A Registration Fees	Name:		
(GST inclusive) Note: Morning Tea, Lunch and Me A Tax Invoice will be FORWARDED TO YOUR AC	5	tion Fee.	
PRIMARY/SECONDARY RATES			
STAV INDIVIDUAL MEMBER	\$270.00	\$	
STAV SCHOOL SUBSCRIBER	\$348.00	\$	
NON-MEMBER	\$382.00	\$	
CONCESSION RATE			
RETIRED TEACHER	\$78.00	\$	
FULL TIME STUDENT TEACHER ONLY - YOU MUS	T include a copy of your student ID or you wi	ll be charged the FULL RATE	
	\$78.00	\$	
STAVCON PRESENTER/CO-PRESENTER'S	FREE		
	TOTAL	COST \$	
Payment details ABN 94 108 759 762	TAX INVOICE		
EFT: BSB Number: 083 166 Account Number Please Note You must include delegates or statement of the Please Note of the Please			
☐ Cheque - make payable to: SCIENCE VICT	TORIA Invoice School Name		
Credit Card (Please tick applicable)	☐ VISA ☐ Master Card		
Card No.	Expiry Date	CCV No.	
Name of Cardholder (please print)	Signature		
Consultation of Pro-			

Cancellation policy:

- Notification of cancellation must be in writing.
- Cancellations made on/or prior to 15 November 2019 will receive a refund less a 50% administration fee.
- There will not be any refunds for cancellations made after this date.
- Registrations are transferable.

EMAIL: stav@stav.vic.edu.au • FAX: 9386 6722