National Teaching and Learning Conference 2010
Registration/Enrolment Form

In order to provide a cost effective conference we have decided to use our student management system to generate invoices, manage payments and provide temporary network access for the duration of the conference. In order to facilitate this we require attendees to 'enrol' in the conference. The system requires us to have specific information. This information will remain confidential and will only be used for accounting purposes.
Please complete this enrolment form, sign and send to:

Registry, Universal College of Learning, Private Bag 11022, Palmerston North. Phone (06) 952 7000 or Fax (06) 952 7016

Please ✓ the box(s) that apply to your conference requirements (all fees are GST inclusive):

- ☐ **Full conference: Wednesday 29 Sept to Friday 1 October** — **Fee: $230.00**
- ☐ **One day registration only: please specify the day** _____ — **Fee: $140.00**
- ☐ **Dinner (Further dinner details including special dietary requirements with workshop registrations)** — **Fee: $ 70.00**

First Name(s): _____ **Surname:** _____

Job Title:_____ **Gender:** Male ☐ Female ☐ **Date of Birth:**____/____/_____

Address: _____

Telephone Number: (Area Code)_____ **Email Address:**_____

Organisation name:_____ **Job Title:**_____

Postal address:_____ **Telephone number:**_____

Contact person:_____

Residency Status:
New Zealand Citizen: ☐ Australian Citizen: ☐ New Zealand Permanent Resident: ☐ Other:_____ ☐

Ethnicity:_____ **Iwi:** _____
(If you identified as a New Zealand Maori)

Payment of Fees Owing

Is an organisation paying your fees? **Order number: Yes** ☐ _____ **No** ☐
(If for any reason this organisation does not pay your fees then you must pay the fees yourself)

Cheque ☐ (**made out to Universal College of Learning**) **Credit Card (Visa or Master Card)** ☐ Company Card ☐ Own Card ☐

Name on Card:_____ **Expiry Date:**_____/_____

Card No: ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ **Payment amount: $**_____:___

Cardholder's Signature: _____

Bank Transfer: UCOL bank account: ANZ 01-0745-0039831-02

Acknowledgement

(i) I undertake to comply with all UCOL's terms and conditions regarding computer use and use of the facility.
(ii) I agree that should I withdraw from the Teaching and Learning Conference before September 25th, 2009 I will forfeit 10% of the registration fee to cover administration costs.
(iii) If I withdraw after the end of the September 25th, 2009 there will be no refund of fees
(iv) Any unpaid fees may be sent to a debt collection agency for recovery

Privacy Statement

Information relating to attendees to the Teaching and Learning conference is recorded for accounting and invoicing purposes only.

Information will not be made available to third parties.

Under the Privacy Act 1993 you may ask UCOL to provide you with copies of the information it holds about you. If you disagree with any such information you may ask to have it corrected.

I declare that, to the best of my knowledge, all the information I have provided on this form is true and complete.

Signature:_____ **Date:**_____

Please Note: Registration for workshops will not be available until 3 August. Please check UCOL and AKO websites after this date.