



## Registration Form

NSW Urological Nurses Society Seminar

Professional Development Day

Friday 2<sup>nd</sup> September 2011

**Burwood RSL** 9 Shaftesbury Rd, Burwood NSW ph: 9744 7444 (Parking on site)

Name:.....(please print)

Email Address:.....

Postal Address:.....

.....

Phone: .....

Workplace:.....

Special Dietary Requirements:.....

### Payment details

**NUNS member: \$65.00**

**Non-member: \$85.00**

**Non-member: \$115.00** (includes NUNS membership fee 30/06/2012) attach completed membership application form

**Registration closes: Friday 24<sup>th</sup> August 2011**

**Method of payment:** (please x the appropriate box)

- Cheque:** payable to: **New South Wales Urological Nurses Society Inc.**
- Internet banking transaction:** **BSB: 062132 Account No: 10011436** (includes credit

card payments) Please include your name as the payee when making an internet banking transaction and,

post the completed registration form to the NUNS postal OR email address.

**Email to:** urological\_nurses@hotmail.com

**Post to:** NSW Urological Nurses Society Inc PO Box 613 Marrickville NSW 1475

**Enquiries:** please contact: 99904148 or email address as above.