

2019 MASTERING BRAIN CHEMISTRY ACADEMIC PROGRAM REGISTRATION FORM

Name: Dr.....

Email: Mobile:

Practice Name:

Practice Address:

Suburb: State: Postcode:.....

Best Contact Number: Practice Manager's Name:

Emergency Contact Number: Emergency Contact Name:

Area of Specialty:

- GP
- Psychiatrist
- Paediatrician

Membership:

- RACGP #:
- ACCRM #:
- Other #:

<p>How did you hear about us?</p> <p>.....</p> <p>.....</p>

DOCTOR TRAINING PROGRAM REGISTRATION FEES please tick one:

See reverse or www.biobalance.org.au for full explanation

NEW DOCTOR TRAINING PROGRAM

Mental Health 5 Day Program (6-10 April) \$2,365 (inc GST)

RETURNING DOCTOR TRAINING PROGRAM

Mental Health or ASD 5 Day Programs (6-10 April) \$1,870 (inc GST)

Must have completed New Doctor Training
Returning Doctor Mental Health and ASD Streams run concurrently.
Recommended for Returning Doctors to complete Mental Health Stream prior to ASD Stream.

- Included in your Registration Fee:**
- Daily morning/afternoon teas and Buffet Lunch,
 - "Meet & Greet" Welcome Cocktail Function and Certificate Ceremony

I will be attending **Meet and Greet at 6:30pm Saturday 6 April 2019** (no extra charge)

I will be bringing patients ***Not required for new Doctors***

Name on Credit Card:	Total Amount\$
Type of Card:	Visa Debit / Visa Credit / Mastercard Debit / Mastercard Credit / Paypal / AMEX
12 digit number:	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Expiry date on card:	<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> PIN # on back: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

Online Payments and Registrations: <https://www.registernow.com.au/secure/Register.aspx?E=30734>

Direct Deposits can be made to: Bank: ANZ BSB: 014 701 Account: 4783 13786 Bio Balance Health

*Please use **name** as Reference when making direct deposits to ensure a receipt is issued.

Please email completed form to: marnie@biobalance.org.au

Registration Enquiries please call: (02) 9798 9857 or General Enquiries (07) 5679 6675

www.biobalance.org.au