



the healthy all-rounder™
mushrooms



**36th Australian Mushroom Growers Conference
October 2009**



SPONSORS - EXHIBITORS

REGISTRATION FORMS

Additional forms are available from
www.oz-mushrooms.com.au

1. Please forward your Exhibition space application form as soon as possible.
2. Follow this with your completed Sponsor / Exhibitor Registration form.
3. All costs listed in these documents are in Australian Dollars and include GST.

NB. Please note that if you download or we send you these forms by E-Mail you can now complete the forms on your computer and E-Mail them back.

36th Australian Mushroom Growers' Conference

Exhibition Space Application Form

Exhibition Dates: Wednesday 30th September – Saturday 4th October
Venue: Gold Coast International Hotel, Staghorn Ave, Surfers Paradise, Qld.
Hotel Telephone: +61 7 5584 1200 Facsimile: +61 7 5584 1280

Please complete the following and return as soon as possible.

Title:.....

Contact Surname: Given Name:.....

Company/Organisation.....

Position within Company/Organisation:

Business Address:

.....

Telephone: Facsimile:

Mobile: Email:.....

Trade Exhibit Space available at fees shown below includes:

1. 3m x 2.0m booth space only; no walls = \$1,200.00 incl. GST
2. Exhibition space walls, signage & lighting = \$600.00 incl GST

Please reserve _____ Exhibition spaces on my behalf.

Would you like a space with walls, signage etc YES NO

Description of Product/Services to be exhibited.

.....

.....

Special Requirements:

.....

Upon receipt of your application the Aim Higher Events will confirm your space and forward an invoice.

I have read and accepted the terms and conditions outlined.

Signature: Date:

Please return to: **Australian Mushroom Growers' Conference**
Aim Higher Events Pty Ltd
PO Box 8133, Werrington County, NSW, Australia 2154
Tel: (61 2) 9673 1490
Fax: (61 2) 8569 1354

No later than 14th August 2009

Exhibitor / Sponsor

REGISTRATION FORM	36th Australian Mushroom Growers' Conference Wednesday 30 th September to 4 th October 2009
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Please circle your response

Registration Type			
Exhibitor Only			
Sponsor / Exhibitor		Sponsorship level or value	
Sponsor Only			

Delegate

Title _____ Given Names _____ Family Name _____

Badge Name _____

Organisation _____

Position _____

Address _____

Address _____

Suburb /Town _____ Post Code _____ State _____ Country _____

Phone (Work) _____ Phone (H) _____

Mobile Phone _____

E-Mail _____

Partner

Title _____ Given Names _____ Family Name _____

Meals

Do you / your partner have any special dietary requirements	
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Organised Dinners

Welcome BBQ Dinner Delegate Attending YES NO Partner Attending YES NO

Gala Dinner: Delegate Attending YES NO Partner Attending YES NO

Accommodation

Date	Time	Departure	Date	Time
Arrival				
Single/ Twin	Double	Suite		

(Please tick appropriate boxes)

Yes No

Do you wish to Share I will share with _____

Are You A Smoker

(Please tick appropriate boxes)

TAX INVOICE

Australian Mushroom Growers' Association

ABN 30 001 491 461

(please retain a copy of this tax invoice for your files as no receipts will be issued)

Costs

REGISTRATION:

Registration Fees – First Person – No Charge	\$0.00 \$	0.00
Registration Fees – For each <u>additional</u> exhibitor/sponsor delegate	\$520.00	\$
<i>Rego fees do not cover the Welcome or Gala Dinners</i>		
<u>Conference Daily Session fees</u> : For additional delegate/exhibitor/sponsor not attending the full		
Day Registration - Thursday	\$220 \$	
- Friday	\$220	\$
- Saturday	\$220	\$
<u>Exhibitor/ Sponsor Dinner Costs</u>		
Welcome Dinner		\$85.00 \$
Gala Dinner	____ @	\$150.00 \$
<u>Accommodation Costs</u> GCI Hotel, Gold Coast		
Room	____	Nights \$205.00 \$
King Spa room	____	Nights \$345.00 \$
<u>Exhibition Space & Sponsorship</u>		
Space Only		\$1,200.00 \$
Booth	____ @	\$600.00 \$
Sponsorship: Level/Type		@ \$
<u>Transfers</u>		
<i>Transfers from Gold Coast Airport (Coolangatta) are available by Taxi or Shuttle. Shuttle tickets are purchased at the airport terminal</i>		
<i>Taxi costs are approximately \$60.00</i>		
Total Registration / Room Upgrades / Activities Costs		\$
<i>(To calculate the gst included in this invoice divide your total payment by 11)</i>		

All costs include Australian GST @ 10%

PAYMENT DETAILS

Cheque

All cheques must be in Australian Dollars & should be made payable to:
Australian Mushroom Growers' Association:

My Cheque # _____ Bank _____ is enclosed for \$ _____

Or if Paying by credit card please tick credit card:

Visa

Mastercard

Amount \$.....

Name on Card:..... ExpiryDate.....

Credit Card Number.....Signature.....

All costs include Aust GST of 10%

Farm Walk:

Will you be attending the Mushroom Farm walk	YES	NO	Number of seats
	<input type="checkbox"/>	<input type="checkbox"/>	

IMPORTANT PLEASE COMPLETE

I/we hereby authorise Aim Higher Events Pty. Ltd. to pass on my/our names and other information on this registration form, as required to secure my hotel bookings. I also authorise my name and address to be included on the Delegates list.

Signature: _____

Please complete the registration form and mail or fax to: -

Australian Mushroom Growers' Conference

C/o Murray Tonkin

Aim Higher Events Pty Ltd,

PO Box 8133,

Werrington County, NSW 2747, Australia.

murrayt@aimhigherevents.com.au

deborahf@aimhigherevents.com.au

Fax: 61 2 8569 1354

Tel: 61 2 9673 1490