

**APPLICATION FOR STUDENT DISCOUNT TO ATTEND**

The Delphi Centre presents  
 Assoc. Prof. John Briere PhD  
**Reconsidering Trauma** 2-DAY CONFERENCE TOUR  
**MELBOURNE** Leonda By The Yarra 16-17 May 2008  
**SYDNEY** Westmead Hospital 20-21 May 2008  
**BRISBANE** The Bardon Conference Centre 24-25 May 2008

In our endeavour to support the quality training of health professionals, we offer a discount for FULL-TIME STUDENTS as well as 4 Scholarships funded from the proceeds of audio-visual recordings of seminars and conferences.

If you do not qualify for the additional student discount you may take advantage of the Scholarship Fund – please see this section in the website for criteria and details.

*(Please use clear BLOCK LETTERS)*

Name: \_\_\_\_\_

Education facility at which I am enrolled: \_\_\_\_\_

Name of Head of School: \_\_\_\_\_

Business hours telephone contact for Department: \_\_\_\_\_

*You must fulfil all criteria - please select what reflects your circumstance:*

- I am currently enrolled as a **full-time** student for 2008
- My / our **combined gross income** is less than \$25,000.00
- I have **attached** a copy of documentation (eg. student card, enrolment papers) that **identifies me as a full-time student** and **circled where this is stated**

I understand that I am eligible for the student discount where all the above boxes are true and accurate with regard to my position and where I am self-funding (payments by an agency/organization are *not eligible* for this extra discount). I **attach this** to my **completed registration form** with full payment at the student discount rate:

- |   |                                |
|---|--------------------------------|
|   | Select                         |
| - <b>Early Bird</b> (mailed or faxed before 6pm AEST on 28 March 2008): | \$295 <input type="checkbox"/> |
| - <b>Standard</b> (mailed or faxed before 6pm AEST on 9 May):           | \$355 <input type="checkbox"/> |
| - <b>Late</b> (mailed or faxed after 6pm AEST on 9 May or onsite):      | \$405 <input type="checkbox"/> |

**IMPORTANT:**

You will automatically be processed as an INDIVIDUAL REGISTRATION type, if the above form is *not* completed or complied with in full, and charged accordingly.

I understand my tax receipt / confirmation letter will be emailed to me within 3 business days and that it is my responsibility to contact The Delphi Centre should I not receive this.

Signed: \_\_\_\_\_ Dated: \_\_\_\_\_

