



VALA – Libraries, Technology and the Future, Inc | Reg No A0011933K | ABN 75 344 574 577

REGISTRATION

Your registration and payment may be sent by:

1 Internet registration: simply visit the VALA2010 website: www.vala.org.au/conf2010, click onto the registration page, complete your details and submit.

2 Complete the registration form and forward by mail or fax to the address as noted, with your payment.

Note: Please retain a copy of your form for your records. Each registrant must complete a separate form (photocopies are acceptable).

On receipt of your confirmation email, it is advisable to check all items listed. Any requests for alterations must be made in writing to the Conference Office.

CONFERENCE OFFICE

For further information please contact:

VALA2010 Conference Office
WALDRONSMITH Management
 61 Danks Street West
 Port Melbourne VIC 3207
 Tel: +61 3 9645 6311 Fax: +61 3 9645 6322
 Email: info@wsm.com.au

SECTION B: CONCURRENT SESSIONS

Please tick your preference below:

Tuesday 9 February 2010

- Concurrent Session 1 – Discovery
- Concurrent Session 2 – Physical and Virtual Access
- Concurrent Session 3 – Repositories
- Concurrent Session 4 – Discovery
- Concurrent Session 5 – Metrics
- Concurrent Session 6 – Repositories

Wednesday 10 February 2010

- Concurrent Session 7 – Innovation
- Concurrent Session 8 – Intellectual Property
- Concurrent Session 9 – Automation
- Concurrent Session 10 – Looking Forward

Thursday 11 February 2010

- Concurrent Session 11 – Social Networking
- Concurrent Session 12 – IT Management
- Concurrent Session 13 – Web/Library 2.0
- Concurrent Session 14 – Online Communities
- Concurrent Session 15 – Digitisation/Publishing
- Concurrent Session 16 – Usability/Portability

SECTION A: DELEGATE DETAILS

This is my first VALA conference. Please tick this box if this is the first VALA Conference you will be attending, so we can extend a special welcome to first time delegates.

Shared Registration (institutions only). Note: with a shared registration, your organisation name *only* will appear on the Conference name badge. Please complete all details below to confirm primary contact.

Prof Dr Mr Ms Mrs Miss

Given name: _____ Preferred name for badge: _____

Surname: _____

Position/Title: _____

Organisation: _____

Department: _____

Address: _____

State: _____ Postcode: _____ Country: _____

Telephone: _____ Fax: _____

Mobile: _____ E-mail: _____

Confidentiality (please tick):

I do not wish for my registration details to be published I do not wish to be contacted by a vendor

Special requirements: Diet: _____

Disability assistance: _____

SECTION C: ACCOMMODATION

Please indicate 1st, 2nd and 3rd preferences in boxes and forward deposit for 1st preference.

I would like to share with, or will be accompanied by: _____

Type of room:

Single Double Twin

Other _____

Arrival date: _____ / _____ / _____

Departure date: _____ / _____ / _____

Smoking Non Smoking

Hotel	Room type	Preference	Room rate/deposit
Hilton Melbourne South Wharf	Guest room	<input type="checkbox"/>	\$265
Crown Promenade	Standard room	<input type="checkbox"/>	\$260
Crown Plaza Melbourne	Standard	<input type="checkbox"/>	\$205
	Deluxe	<input type="checkbox"/>	\$235
Holiday Inn Flinders	Standard	<input type="checkbox"/>	\$185
Quality Hotel Batman's Hill on Collins	Club room	<input type="checkbox"/>	\$176
	One bedroom apartment	<input type="checkbox"/>	\$228
Rendezvous Hotel Melbourne	Deluxe room	<input type="checkbox"/>	\$189
	Commerce room	<input type="checkbox"/>	\$219
Medina Executive Northbank	One bedroom apartment	<input type="checkbox"/>	\$209
Melbourne Short Stay Apartments	One bedroom, one bathroom	<input type="checkbox"/>	\$189
	Two bedroom, one bathroom	<input type="checkbox"/>	\$229
	Two bedroom, two bathroom	<input type="checkbox"/>	\$249
Riverside Apartments	Three bedroom, two bathroom	<input type="checkbox"/>	\$369
	One bedroom apartment	<input type="checkbox"/>	\$210
	Two bedroom apartment	<input type="checkbox"/>	\$290

TOTAL PAYMENT SECTION C: \$ _____

All accommodation prices quoted on this page are Australian Dollars and inclusive of GST.

SECTION D: REGISTRATION FEES AND FUNCTIONS

Purchase of one full registration includes: entry to all sessions, lunches, morning and afternoon teas, Welcome Reception, Farewell Refreshments and a copy of the proceedings on CD-ROM. Conference Dinner tickets must be purchased separately. All participants are required to officially register. The following fees apply.

VALA membership number: _____

- Personal
 Institution

Become a member of VALA and save on your Conference Registration Fee: to join, go to www.vala.org.au/membership.htm

Note: institutions are entitled to two delegates per membership

Registration type	VALA Member	Non member	Payment \$AUD
FULL REGISTRATION – EARLY BIRD Payment received up to 30 November 2009	\$880.00+GST=\$968.00	\$1040.00+GST=\$1144.00	\$
FULL REGISTRATION Payment received after 30 November 2009	\$1080.00+GST=\$1188.00	\$1240.00+GST=\$1364.00	\$
SPEAKER REGISTRATION DISCOUNT – EARLY BIRD Payment received up to 30 November 2009 Paper number: _____ (one per paper only)	\$595.00+GST=\$654.50	\$755.00+GST=\$830.50	\$
SPEAKER REGISTRATION DISCOUNT Payment received after 30 November 2009 Paper number: _____ (one per paper only)	\$795.00+GST=\$874.50	\$955.00+GST=\$1050.50	\$
FULL TIME STUDENT A copy of student identification must be provided	\$300.00+GST=\$330.00	\$380.00+GST=\$418.00	\$
DAY REGISTRATION – EARLY BIRD Payment received up to 30 November 2009 Day of attendance: <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday	\$450.00+GST=\$495.00	\$540.00+GST=\$594.00	\$
DAY REGISTRATION Payment received after 30 November 2009 Day of attendance: <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday	\$525.00+GST=\$577.50	\$615.00+GST=\$654.50	\$
CONFERENCE DINNER	\$110.00+GST=\$121.00	\$110.00+GST=\$121.00	\$
WIRELESS ACCESS <input type="checkbox"/> Up to 22 January \$30.00+GST=\$33.00 <input type="checkbox"/> From 23 January \$35.00+GST=\$38.50			\$

Function tickets for additional people wishing to attend the social events can be purchased by completing this section.

WELCOME RECEPTION Tuesday 9 February 2010 Number of additional tickets: _____	\$60.00+GST=\$66.00	\$
CONFERENCE DINNER Wednesday 10 February 2010 Number of additional tickets: _____	\$110.00+GST=\$121.00	\$
ADDITIONAL CONFERENCE PROCEEDINGS One copy of the Conference Proceedings on CD-ROM is included in the satchel of each full registration delegate. Additional copies may be purchased. Number of additional copies: _____	\$45.00+GST=\$49.50	\$
TOTAL PAYMENT SECTION D:		\$

SECTION E: GREENFLEET

Contributing to the environment

I wish to make a donation to Greenfleet to help offset the greenhouse gas emissions associated with my VALA2010 conference travel. All donations are tax deductible in Australia.

\$10 \$20 \$40 Other amount \$ _____

[For contributions of \$10 or more only] I wish to receive a receipt from Greenfleet. I give permission for my details to be forwarded to Greenfleet for the purposes of issuing a receipt only.

TOTAL PAYMENT SECTION E: \$ _____

SECTION F: PAYMENT OF FEES

Upon payment of the total amount due, this document will be a Tax Invoice

TOTAL PAYMENT SECTION C: \$ _____

TOTAL PAYMENT SECTION D: \$ _____

TOTAL PAYMENT SECTION E: \$ _____

TOTAL PAYMENT DUE: \$ _____

SECTION G: PAYMENT METHOD

VALA2010 accepts the following payment methods: EFT, Cheque, MasterCard or VISA. Please tick:

Electronic Funds Transfer (EFT)

All EFT payments to be made to **VALA – Libraries, Technology and the Future, Inc:**
Bank: ANZ / BSB: 013 278 / Account Number: 2999 93771. Please use your name as a reference and include a copy of your remittance advice with your registration form or email details to vicki@wsm.com.au

Cheque

All cheques to be made payable to **VALA – Libraries, Technology and the Future, Inc.** International delegates are required to pay by international bank cheque in **Australian** dollars only, which must be drawn on any major Australian bank. Cheques not made out as requested may be returned by our bank.

VISA **MasterCard**

Card number:

Cardholder's name: _____ Expiry date: _____ / _____

Cardholder's signature: _____ Date: _____ / _____ / _____

All prices quoted within this brochure are in Australian dollars.