REGISTRATION INFORMATION

Delegate Details

The following details will be required during the online registration process; please complete and submit to the relevant section in your organisation for processing.

Title:	First Name: ation will appear on your VALA2020 Conferen		Last Name:			
Work Phone:	ition will appear on	your valazozo conjere	мсе вааде) Mobile Pho	ne·		
Delegate Emai	nique email address	for this delegate. Memi			ociated witi	
footage and im	• • • • • • • • • • • • • • • • • • • •	nline webcasts, video ished by VALA during vebsite.	•	,	•	
Media Waiver	DO NO	Γauthorise VALA to us	se my image			
_	•	ectronically to all delessation, state/country		pating sponsors and	exhibitors	
Delegate List	☐ I DO NO	Γ give permission for r	ny name to be	e included on the De	legate List	
First Time Atte	nding VALA?	res	No 🗌			
Individual Reg	gistration Type					
Full Re	gistration – 3 days	, all sessions				
☐ Individual Day Registration —						
	Tuesday 11 Feb	☐ Wednesday	12 Feb	☐ Thursday 13 Fe	eb	
Social Functio	ons					
☐ Welcor	me Reception – Tu	esday 11 Feb	Additional G	Guests (payment req	uired):	
☐ Farewe	ell Refreshments –	Thursday 13 Feb				
Delegate Spe	cial Requiremen	ts				
☐ Special	Dietary Needs – p	olease provide details	:			
Mobility Requirements – please provide details:						
☐ Any Re	Any Registration Questions – please ask them:					

Accommodation

If you require accommodation and seek reservations via the VALA2020 portal, please attach details. See https://www.vala.org.au/conferences/vala2020/accommodation/ for more information on the options available.