Teaching for Excellence – Excellence in Teaching
National Conference 2009

Enrolment Form

In order to provide a cost effective conference we have decided to use our student management system to generate invoices, manage payments and provide temporary network access for the duration of the conference. In order to facilitate this we require attendees to 'enrol' in the conference. The system requires us to have specific information. This information will remain confidential and will only be used for accounting purposes.
Please complete this enrolment form, sign and send to:

Registry, Universal College of Learning, Private Bag 11022, Palmerston North. Phone (06) 952 7000 or Fax (06) 952 7016

Please ✓ the box(s) that apply to your conference requirements (all fees are GST inclusive):

- ☐ **eFest 'open space' on Tuesday 29 September** — **Fee: $ 35.00**
- ☐ **Full conference: Wednesday 30 Sept to Friday 2 October** — **Fee: $220.00**
- ☐ **One day registration only: please specify the day** _____ — **Fee: $140.00**
- ☐ **Dinner (Provided free of charge for anyone presenting at the conference therefore Conference presenters don't need to ✓ this box. Further dinner details including special dietary requirements with workshop registrations)** — **Fee: $ 70.00**

**** Your payment or an order number is expected with the return of your completed enrolment form ****

First Name(s): _____ **Surname:** _____

Gender: Male ☐ Female ☐ **Date of Birth:** ____/____/____

Address: _____

Telephone Number: (Area Code) _____ **Email Address:** _____

Residency Status:
New Zealand Citizen: ☐ Australian Citizen: ☐ New Zealand Permanent Resident: ☐ Other:_____ ☐

Ethnicity: _____ **Iwi:** _____
(If you identified as a New Zealand Maori)

Payment of Fees Owing

Cheque ☐ **(made out to Universal College of Learning)** **Credit Card (Visa or Master Card)** ☐

Name on Card: _____ **Expiry Date:** ____/____

Card No: ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ **Payment amount: $**____:__

Cardholder's Signature: _____

Is an organisation paying your fees? (If for any reason this organisation does not pay your fees then you must pay the fees yourself)

Organisation name: _____

Postal address: _____ **Telephone number:** _____

Contact person: _____ **Order number:** _____

Acknowledgement

(i) I undertake to comply with all UCOL's terms and conditions regarding computer use and use of the facility.
(ii) I agree that should I withdraw from the Teaching and Learning Conference before September 25th, 2009 I will forfeit 10% of the registration fee to cover administration costs.
(iii) If I withdraw after the end of the September 25th, 2009 there will be no refund of fees
(iv) Any unpaid fees may be sent to a debt collection agency for recovery

Privacy Statement

Information relating to attendees to the Teaching and Learning conference is recorded for accounting and invoicing purposes only.

Information will not be made available to third parties.

Under the Privacy Act 1993 you may ask UCOL to provide you with copies of the information it holds about you. If you disagree with any such information you may ask to have it corrected.

I declare that, to the best of my knowledge, all the information I have provided on this form is true and complete.

Signature: _____ **Date:** _____

Please Note: Registration for workshops will not be available until 3 August. Please check UCOL and eFest websites after this date.